

STATE OF KANSAS
STATE CORPORATION COMMISSION
Finney State Office Building
130 South Market, Rm 2078
Wichita, Kansas 67202

WELL PLUGGING RECORD
K.A.R.-82-3-117

API NUMBER 15-175-21420 - 0000

LEASE NAME SALLEY "K"

WELL NUMBER 1H

1250 Ft. from S Section Line

4030 Ft. from E Section Line

SEC. 33 TWP. 33 RGE 33 (E) or (W)

COUNTY SEWARD

Date Well Completed 6-20-95

Plugging Commenced 3-14-96

Plugging Completed 3-14-96

TYPE OR PRINT
NOTICE: Fill out completely
and return to Cons. Div.
office within 30 days

LEASE OPERATOR ANADARKO PETROLEUM CORPORATION

ADDRESS P.O. BOX 351, LIBERAL, KS 67901-0351

PHONE # (316) 624-6253 OPERATORS LICENSE NO. 4549

Character of Well DRY

(Oil, Gas, D&A, SWD, Input, Water Supply Well)

The plugging proposal was approved on 3-12-96 (date)

by RON MIDDLETON (KCC District Agent's Name)

Is AC0-1 filed? YES If not, is well log attached? _____

Producing Formation NONE Depth to Top _____ Bottom _____ T.D. 2680

Show depth and thickness of all water, oil and gas formations.

OIL, GAS OR WATER RECORDS

CASING RECORD

Formation	Content	From	To	Size	Put In	Pulled Out
				8-5/8"	674'	NONE
				5-1/2"	2595'	NONE

Describe in detail, the manner in which the well was plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. If cement or other plugs were used, state the character of same and depth placed, from _____ feet to _____ feet each set.

MIRU PLUGGERS. PMPD DOWN 5-1/2" CASING W/2SXS HULLS & 25 SXS CMT PLG FROM 2600-2400'. DISPLACE W/9PPG MUD. PMPD 25 SXS CMT PLG FROM 1600-1400'. DISPLACE W/9PPG MUD. PMPD 65 SXS CMT PLG FROM 700-0'. CUT OFF 8-5/8" & 5-1/2" CASING 3' BELOW GL AND CAP. PERMANENTLY INSCRIBE WELL NAME AND DATE PLUGGED ON CAP. RDMO PLUGGERS & RESTORE LOCATION.

(If additional description is necessary, use BACK of this form.)

Name of Plugging Contractor SARGENT & HORTON PLUGGERS, INC. License No. 31151

Address RT 1, BOX 49BA, TYRONE, OKLAHOMA 73951-9731

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: ANADARKO PETROLEUM CORPORATION

STATE OF KANSAS COUNTY OF SEWARD, ss.

DAVID W. KAPPLE (Employee of Operator) or (xxxxxxx) of above-described well, being first duly sworn on oath, says: That I have knowledge of the facts, statements, and matters herein contained and the log of the above-described well as filed that the same are true and correct, so help me God.

(Signature) David W. Kapple

(Address) P.O. BOX 351, LIBERAL, KS 67901-0351

RECEIVED
KANSAS CORPORATION COMMISSION

SUBSCRIBED AND SWORN TO before me this 3rd day of April, 1996

APR 05 1996

Freda L. Hinz
Notary Public

CONSERVATION DIVISION
WICHITA, KS

My Commission Expires:

FREDA L. HINZ
Notary Public - State of Kansas
My Appt. Expires 5-15-99

Form CP-4
Revised 05-88