

STATE OF KANSAS
STATE CORPORATION COMMISSION
200 Colorado Derby Building
Wichita, Kansas 67202

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

API NUMBER 15-129-20,454-0000

LEASE NAME INTERSTATE "F"

WELL NUMBER 3

1650 Ft. from S Section Line

1250 Ft. from E Section Line

SEC. 20 TWP. 34S RGE. 43 (E) or (W)

COUNTY Morton

Date Well Completed 12/21/80

Plugging Commenced 3/15/95

Plugging Completed 3/15/95

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, Kansas 67905-0351

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

Character of Well Gas

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

The plugging proposal was approved on 3/15/95 (date)

by Glenn Barlow (KCC District Agent's Name).

Is ACO-1 filed? Drillers Log Filed If not, is well log attached? _____

Producing Formation None Depth to Top _____ Bottom _____ T.D. 1330'

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	350'	3'
				4 1/2	1330'	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, CIRC HOLE W/MUD. MIX 1 SK HULLS & 20 SXS CMT, SPOT HULLS & CMT FROM 1179-979'. PULL 2 3/8" TBG TO 600'. MIX & SPOT 30 SXS CMT FROM 600-300'. PULL TO 40' & SPOT 5 SXS CMT FROM 40-0'. CUT OFF 8 5/8" & 4 1/2" CSG, CAP 8 5/8" 3' BELOW GL. WITNESSED BY KCC REP GLENN BARLOW. RESTORE LOCATION.

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

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

Address RT 1, BOX 49BA, TYRONE, OK 73951-9731 (405) 854-6515

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: ANADARKO PETROLEUM CORPORATION

STATE OF KANSAS COUNTY OF SEWARD, ss.

LESLIE I. BARNES, SR. TECHNICAL ASSISTANT

(Employee of Operator) or (Operator) 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) Leslie I. Barnes

(Address) P. O. BOX 351, LIBERAL, KS 67905-0351

SUBSCRIBED AND SWORN TO before me this 28 day of March, 19 95

Cheryl Steers
Notary Public

My Commission Expires:

