

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

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

15-129-00331-00-00
API NUMBER _____

LEASE NAME BARKER

WELL NUMBER 1-27

1980 FNL Ft. from S Section Line

1987 FEL Ft. from E Section Line

SEC. 27 TWP. 33 RGE. 41 (E) or ()

COUNTY MORTON

Date Well Completed 9-1-56

Plugging Commenced 11-13-01

Plugging Completed 11-15-01

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

LEASE OPERATOR ANADARKO PETROLEUM CORPORATION

ADDRESS 701 S TAYLOR, STE 400 AMARILLO, TX 79101

PHONE # (806) 457-4600 OPERATORS LICENSE NO. 4540

Character of Well GAS

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

The plugging proposal was approved on 11-3-01 (date)

by JIM HOLLAND (KCC District Agent's Name).

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

Producing Formation CHASE Depth to Top 2130 Bottom 2199 T.D. 2280

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
CHASE	GAS	2130	2199	7"	499	0
				4 1/2	2274	0

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. CMT RETAINER @ 2184.

SPOT 15 SXS HULLS & 55 SXS CMT FROM 1874-1160. SPOT 20 SXS CMT FROM 600-200. SPOT 55 SXS CMT FROM 60-SURFACE DOWN ANULUS. SPOT 6 SXS CMT FROM 60-SURFACE DOWN CSG. CUT OFF AND CAP CSG 3' BELOW GL. RDMO AND RESTORE LOCATION.

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

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

Address RT 1 BOX 49BA, TYRONE, OK 73951-9731 PHONE: (580) 854-6515

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: ANADARKO PETROLEUM CORPORATION

STATE OF KANSAS COUNTY OF SEWARD, ss.

CRAIG R. WALTERS, P.E., DIVISION PRODUCTION ENGINEER (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) Craig R. Walters

CRAIG R. WALTERS, P.E., DIV. PROD. ENGINEER

(Address) 701 S. TAYLOR, STE 400 AMARILLO, TX 79101

SUBSCRIBED AND SWORN TO before me this _____ day of _____, 20__

Notary Public

My Commission Expires: _____

OR