

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

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

API NUMBER 15-189-21,431-0000

LEASE NAME Chandley "B"

TYPE OR PRINT

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

WELL NUMBER 1H

4030 Ft. from S Section Line

3820 Ft. from E Section Line

LEASE OPERATOR Anadarko Petroleum Corporation

SEC. 25 TWP. 33S RGE. 35 (R) or (W)

ADDRESS P. O. Box 351, Liberal, Kansas 67905-0351

COUNTY Stevens

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

Date Well Completed 10/2/90

Character of Well _____

Plugging Commenced 11/28/94

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

Plugging Completed 11/30/94

The plugging proposal was approved on 11/30/94 (date)

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

Is ACO-1 filed? Yes If not, Is well log attached? _____

Producing Formation None Depth to Top _____ Bottom _____ T.D. 2905

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"	613'	3'
				5 1/2"	2903'	630'

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 Sargents. TOH w/rods & pmp. TOH w/tbg & ld 89 jts. Pmp 7 sxs hulls & 25 sxs cmt plg 2638-2500'. Cut 5 1/2" csg off @ 630'. Pmp 50 sxs cmt plg 630-500'. Pull to 40'. Pmp 10 sxs cmt plg 40-0'. Rec 15 jts 5 1/2" csg. Cut off & cap 3' below gl. Witnessed by Glenn Barlow.

(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 with the Commission that the same are true and correct, so help me God.

(Signature) Leslie I. Barnes **DEC 22 1994**

(Address) Leslie I. Barnes, Sr. Tech. Asst. P.O. Box 351, Liberal, KS 67905-0351

SUBSCRIBED AND SWORN TO before me this 30 day of December, 1994

Cheryl Steers
Notary Public

My Commission Expires: 