

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

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

API NUMBER 15-189-21247-0000
LEASE NAME ELLIOTT "B"
WELL NUMBER 1H

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

RECEIVED
KANSAS CORP COM

1250 Ft. from S Section Line
1250 Ft. from E Section Line
SEC 24 TWP. 34S RGE 38 (E) or (W)

LEASE OPERATOR ANADARKO PETROLEUM CORPORATION
ADDRESS P.O. BOX 351, LIBERAL, KS 67901-0351
PHONE # (316) 624-6253 OPERATORS LICENSE NO. 4549

COUNTY STEVENS
Date Well Completed _____
Plugging Commenced 1-20-98
Plugging Completed 1-20-98

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

The plugging proposal was approved on 1-12-98 (date)
by GARY WINTERS (KCC District Agent's Name)

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

Producing Formation CHASE Depth to Top 2657 Bottom 2968 T.D. 3007

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	2657	2968	8-5/8"	652	0
				5-1/2"	3003	703

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. PMP 4 SXS HULLS AND 25 SXS CMT @ 2457-2657. SHOOT OFF 5-1/2" CSG @ 703'. SPOT 50 SXS CMT @ 550-700'. SPOT 10 SXS CMT @ 4 - 40'. CUT OFF 8-5/8" CSG 4' BELOW GI AND CAP. NO. STATE WITNESS.

(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.

SHAWN D. YOUNG, 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) Shawn D. Young
SHAWN D. YOUNG, DIVISION PRODUCTION ENGINEER

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

SUBSCRIBED AND SWORN TO before me this 11th day of March, 1998.

Shirley Childers
Notary Public

My Commission Expires: _____

