

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 15-175-217340000

LEASE NAME HJV LAMBERT "C"

WELL NUMBER 1

1980 Ft. from S Section Line

1980 Ft. from E Section Line

SEC. 21 TWP. 32 RGE. 32 (E) or (W)

COUNTY SEWARD

Date Well Completed 6-11-98

Plugging Commenced 6-13-98

Plugging Completed 6-14-98

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 D&A

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

The plugging proposal was approved on 6-13-98 (date)

by STEVE DURANT (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. 6100

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"	1658	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. TLH W/4 1/2" DP TO 3000' & SET 100 SKS 60/40 POZMIX, 6% GEL @ 3000', TOH TO 1670' & SET 50 SKS, TOH TO 600' & SET 25 SKS, TOH TO 40' & SET 15 SKS FROM 40' TO 0'. SET 10 SKS IN MH & 15 SKS IN RH. CUT OFF 8-5/8" CSG 3' BELOW GI AND CAP, PERMANENTLY INSCRIBE WELL NAME, NUMBER AND DATE PLUGGED ON CAP.

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

Name of Plugging Contractor HALLIBURTON ENERGY SERVICES License No. 5287

Address P.O. BOX 1598, LIBERAL, KANSAS 67905-1598

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: ANADARKO PETROLEUM CORPORATION

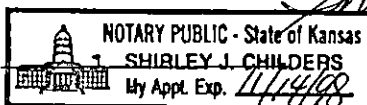
STATE OF KANSAS COUNTY OF SEWARD, ss.

L. MARC HARVEY, DRILLING 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) L. Marc Harvey
 L. MARC HARVEY, DRILLING TECHNICAL ASSISTANT
 (Address) P.O. BOX 351, LIBERAL, KS 67901-0351

SUBSCRIBED AND SWORN TO before me this 14th day of August, 1998.

My Commission Expires:



Notary Public