

TIGHT

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

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

API NUMBER 15-187-20817-0000

LEASE NAME Natalie Anne

WELL NUMBER 1-34

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

1980 Ft. from S Section Line

1980 Ft. from E Section Line

SEC. 34 TWP. 29S RGE. 40 (E) or (W)

COUNTY Stanton

Date Well Completed 3-5-96

Plugging Commenced 3-5-96

Plugging Completed 3-5-96

LEASE OPERATOR Amoco Production Company

ADDRESS PO Box 800 Room 924 Denver, CO 80201

PHONE# (303) 830-5323 OPERATORS LICENSE NO. 5952

Character of Well D&A

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

The plugging proposal was approved on March 5, 1996 (date)

by Steve Middleton (KCC District Agent's Name).

Is ACO-1 filed? NO If not, is well log attached? ACO-1 and logs are being filed at the same time as this record.

Producing Formation Dry Depth to Top _____ Bottom T.D. 5745'

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
	Surface			8.625"	1729'	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.
Well was plugged using 60/40 Premium POZ cement with 6% gel as follows: Plug No. 1-2850' w/ 100 sx cement; Plug No. 2-1750' w/50 sx cement; Plug No. 3-450' w/40 sx cement; Plug No. 4-40' w/10 sx cement; Rathole w/15 sx cement and Mousehole w/10 sx cement.

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

Name of Plugging Contractor Halliburton License No. _____ RECEIVED STATE CORPORATION COMMISSION

Address _____ NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Amoco Production Company MAR 28 1996

STATE OF Colorado COUNTY OF Denver, ss. _____

Susan R. Potts (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) Susan R. Potts

(Address) PO Box 800 Room 924 Denver, CO 80201

SUBSCRIBED AND SWORN TO before me this 27th day of March, 19 96

My Commission Expires January 4, 1997

Notary Public

1670 BROADWAY
DENVER, CO 80202
Revised 05-88