

STATE OF KANSAS  
STATE CORPORATION COMMISSION  
CONSERVATION DIVISION  
500 INSURANCE BUILDING  
212 NORTH MARKET  
WICHITA 2, KANSAS

FORM CP-1

WELL PLUGGING APPLICATION FORM  
File One Copy

Lease Owner

*Kenneth Kless*

Address

*Box 556*

*Chautauk County*

Lease (Farm Name)

*Barker A*

Well No. *036*

Well Location

*SE-SE-SW*

Sec. *4*

Twp. *27*

Rge. *18*

(E)

(W)

County

*Washburn*

Field Name (If any)

Total Depth

*741*

Oil Well

Gas Well

Input Well

SWD Well

D & A

Was well log filed with application?

*No* If not, explain:

*No log available*

Date and hour plugging is desired to begin

*3/29/66*

Plugging of the well will be done in accordance with the Rules and Regulations of the State Corporation Commission.

Name of company representative in charge of plugging operations

*Dean Suddiemer*

Address

*El Dorado Kansas*

Plugging Contractor

*W. R. Suddiemer*

License No. *60*

Address

*El Dorado Kansas*

Invoice covering assessment for plugging this well should be sent to *Kenneth Kless*

*Box 556*

Address

*Chautauk County*

and payment will be guaranteed by applicant.

*2" shot off at 550' and put in seven sections cement. Set bridge at 150' and put in seven sections cement. Set bridge at 25' and put in four sections cement. Set bridge at 10' and put in four sections cement. Plugging started & finished 3/28/66*

Signed: *Dean Suddiemer*  
Applicant or Acting Agent

Date: *3/28/66*