

STATE OF KANSAS  
KANSAS CORPORATION COMMISSION  
CONSERVATION DIVISION  
130 South Market - Room 2078  
Wichita, Kansas 67202

FORM CP-1 (3/92)

**WELL PLUGGING APPLICATION FORM**  
(PLEASE TYPE FORM and File **ONE** Copy)

API # 15-023-20322-00-00 (Identifier number of this well). This must be listed for wells drilled since 1967; if no API# was issued, indicate spud or completion date.

WELL OPERATOR Smokey Valley Resources, Inc. KCC LICENSE # 32081  
(owner/company name) (operator's)

ADDRESS P.O. Box 199 CITY Chase

STATE KS ZIP CODE 675245 CONTACT PHONE # (620) 938.2470

LEASE Briney Farms WELL# 1 SEC. 4 T. 5S R. 37 (East/West)

SW - SE - NE - SPOT LOCATION/QQQQ COUNTY Cheyenne

2000 FEET (in exact footage) FROM S/N (circle one) LINE OF SECTION (NOT Lease Line)

690 FEET (in exact footage) FROM E/W (circle one) LINE OF SECTION (NOT Lease Line)

Check One: OIL WELL  GAS WELL  D&A  SWD/ENHR WELL  DOCKET# \_\_\_\_\_

CONDUCTOR CASING SIZE \_\_\_\_\_ SET AT \_\_\_\_\_ CEMENTED WITH \_\_\_\_\_ SACKS

SURFACE CASING SIZE 8 5/8" SET AT 341' CEMENTED WITH 250 SACKS

PRODUCTION CASING SIZE 4 1/2" SET AT 4924' CEMENTED WITH 375 SACKS

LIST (ALL) PERFORATIONS and BRIDGEPLUG SETS: 4594-4598

ELEVATION 3343' T.D. 4932' PBTD \_\_\_\_\_ ANHYDRITE DEPTH \_\_\_\_\_  
(G.L./K.B.) (Stone Corral Formation)

CONDITION OF WELL: GOOD  POOR  CASING LEAK  JUNK IN HOLE

PROPOSED METHOD OF PLUGGING To the rules and regulations of the KCC.

(If additional space is needed attach separate page)

IS WELL LOG ATTACHED TO THIS APPLICATION AS REQUIRED? No IS ACO-1 FILED? Yes

If not explain why? \_\_\_\_\_

PLUGGING OF THIS WELL WILL BE DONE IN ACCORDANCE WITH K.S.A. 55-101 et. seq. AND THE RULES AND REGULATIONS OF THE STATE CORPORATION COMMISSION.

LIST NAME OF COMPANY REPRESENTATIVE AUTHORIZED TO BE IN CHARGE OF PLUGGING OPERATIONS:

George Saling PHONE# ( ) 620.938.2470

ADDRESS P.O. Box 199 City/State Chase, KS

PLUGGING CONTRACTOR Northwest Well Service KCC LICENSE # 31664  
(company name) (contractor's)

ADDRESS P.O. Box 159, Merino, CO 80741 PHONE # ( ) \_\_\_\_\_

PROPOSED DATE AND HOUR OF PLUGGING (If Known?) ASAP 1-27-2002 @ 9:00am

PAYMENT OF THE PLUGGING FEE (K.A.R. 82-3-118) WILL BE GUARANTEED BY OPERATOR OR AGENT

DATE: 1/31/02 AUTHORIZED OPERATOR/AGENT: [Signature]  
Rec'd (Signature)

1-15-2002