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KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

WELL PLUGGING APPLICATION

Please TYPE Form and File ONE Copy

Form CP-1 September 2003 This Form must be Typed Form must be Signed All blanks must be Filled

API # 15 - 155-20,597-60-01	(Identifier Number of this well).	This must be listed for wells drille	ed since 1967; if no API # was issued,
indicate original spud or completion date spud da	ate: 6/16/1979		40
Well Operator: Clinton Production, Inc.		KCC License #: 5585	
Address: 330 N. Armour	ner/Company Name)	City: Wichita	(Operator's)
	Zip Code: 67206	Contact Phone: (316)	684 - 7996
Lease: Crow	Well #: 1	Sec. 5 Twp. 24	S. R. 8 East West
C - SW - NE .	Spot Location / QQQQ Cour	_{ity:} Reno	
3300 Feet (in exact footage) From	North / South (from near	rest outside section corner) Line of S rest outside section corner) Line of S Water Supply Well	
Conductor Casing Size:			Sacks
Surface Casing Size: 8 5/8	Set at: 264	Cemented with: 275	5 Sacks
Production Casing Size: 4 1/2	Set at: 3830	Cemented with: 250	OSacks
List (ALL) Perforations and Bridgeplug Sets: 3490)-96, 3556-60		
Elevation: 1668 (VG.L./ KB.) T.D.: 414	3 PBTD: 3565	nhydrite Depth:	
Condition of Well: Good Poor	Casing Leak J	unk in Hole	(Stone Corral Formation)
Proposed Method of Plugging (attach a separate page		ccordance to KCC regulation	ons
Is Well Log attached to this application as required?	Yes No Is ACO-1 file	d? Yes No	
If not explain why?			
Plugging of this Well will be done in accordance List Name of Company Representative authorized to		Marina Hamilton	state Corporation Commission.
Address: 330 N. Armour		City / State; Wichita, Kar	nsas
Plugging Contractor: to be reported to KCC	like's Testing + Salvage		29
Address: POBOX 467 Chase K5	impany Name) J	Phone: ()	(Contractor's)
Proposed Date and Hour of Plugging (if known?):	To be reported to KGO /	1-22-03 Plugg	ed
Payment of the Plugging Fee (K.A.R. 82-3-118) wi	Il be guaranteed by Operator or A	gent /	