

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# 025-21183-00-00 (Identifier number of this well). This must be listed for wells drilled since 1967; if no API# was Issued, indicate spud or completion date.

RECEIVED

WELL OPERATOR EOG RESOURCES, INC.

KCC LICENSE # 5278

6/3

ADDRESS 20 N. BROADWAY, STE. 800

JUL 03 2003

CITY OKLAHOMA CITY

STATE OKLAHOMA

ZIP CODE 73102

KCC WICHITA

CONTACT PHONE # (405) 239-7800

LEASE THEIS

WELL# 6 #3

SEC. 6 T. 35S R. 25 (East/West)

NW - SE - SE - SPOT LOCATION/0000

COUNTY CLARK

990 FEET (in exact footage) FROM SN (circle one) LINE OF SECTION (NOT Lease Line)

990 FEET (in exact footage) FROM EW (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 818' CEMENTED WITH 400 SACKS

PRODUCTION CASING SIZE 4 1/2" SET AT 6300' CEMENTED WITH 240 SACKS

LIST (ALL) PERFORATIONS AND BRIDGEPLUG SETS: 5953' - 6055'

ELEVATION 2093'/2103' TD 6300' PBTD _____ ANHYDRITE DEPTH _____
(G.L./K.B.) (Stone Corral Formation)

CONDITION OF WELL: GOOD POOR CASING LEAK JUNK IN HOLE

PROPOSED METHOD OF PLUGGING SET CIBP @ 5903' W/10' CMT ON TOP, SET CMT PLUG @ 717' - 917', SET CMT PLUG @ 3' - 33', CAP WELL.

(If additional space is needed attach separate page)

IS WELL LOG ATTACHED TO THIS APPLICATION AS REQUIRED? YES 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:
STAN BLUNDELL PHONE # (405) 239-7881
ADDRESS 20 N. BROADWAY, STE. 800 CITY/STATE OKLAHOMA CITY, OK
73102

PLUGGING CONTRACTOR ~~TO BE DETERMINED~~ Orr Enterprises Inc. KCC LICENSE # 33338
(company name) (contractor's)

ADDRESS P.O. Box 1706, Duncan, OK 73534 PHONE # (____) _____

PROPOSED DATE AND HOUR OF PLUGGING (If Known?) UPON APPROVAL 2-9-04 Plugged
PAYMENT OF THE PLUGGING FEE (K.A.R. 82-3-118) WILL BE GUARANTEED BY OPERATOR OR AGENT

DATE: 07/01/03 AUTHORIZED OPERATOR/AGENT: Trish Hambricht
TRISH HAMBRIGHT/SR. ENGINEERING TECH