STATE OF KANSAS STATE CORPORATION COMMISSION CONSERVATION DIVISION 800 BITTING BUILDING 15-005-00053-00-00 WICHITA, KANSAS

WELL PLUGGING APPLICATION FORM

Well Location sw sw ne Sec. 15	Twp. 6 Rge. 22 (W)
	County Graham
Lease (Farm Name) <u>Gudgell</u>	Well No.
Was well log filed with application	? Yes If not, explain circumstances
and give available data (Use an add	itional sheet if necessary)
	o begin <u>4/28/44</u>
Plugging of the well will be done in	n accordance with the Rules and Regu-
lations of the State Corporation Cor	mmission, or with the approval of
the following exceptions: Explain	fully any exceptions desires (Use an
additional sheet if necessary)	
Name of the person on the lease in o	
R. W. Francis Address Gree	
Name of well owner or Acting Agent_	
Address	
Invoice covering assessment for plug	
	S Russell, Kansas.
and payment will be guaranteed by ap	Operator or Adaps Agent Date 4/28/44
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