STATE OF KANSAS STATE CORPORATION COMMISSION CONSERVATION DIVISION 200 DERBY BLDG. WICHITA, KANSAS 67202

Rev. 12-11-80 FORM CP-1

WELL PLUGGING APPLICATION FORM FILE ONE COPY

STATE CODDORATION COMMISSION. 1111 4 ... CONSERVATION DIVISION Wichita. Kansas

API NUMBER $6-10-82$ 15-181-20227 (THIS MUST BE LISTED, IF NO API# AVAILABLE	(OF THIS WELL) PLEASE NOTE DRILLING COMPLETION DATE.)
LEASE OWNER Beren Corporation	
ADDRESS 970 Fourth Financial Ctr., Wichita,	KS 67202
LEASE (FARM NAME) Hartley #1	WELL NO1
WELL LOCATION 2310' fSL & 1840' fWL SW	SEC. 12 TWP. 6S RGE. 37 (PAST) (WEST)
COUNTY Sherman	TOTAL DEPTH 4960' FIELD NAME
OIL WELL GAS WELL INPUT WELL _	SWD WELL D&A _ Yes.
WELL LOG ATTACHED WITH THIS APPLICATION AS R (IF NOT STATE REASON WHY)	EQUIRED? Yes.
DATE AND HOUR PLUGGING IS DESIRED TO BEGIN _	6-10-82
PLUGGING OF THIS WELL WILL BE DONE IN ACCORD	ANCE WITH K.S.A. 55-128 OF THE RULES AND
REGULATIONS OF THE STATE CORPORATION COMMISS	ION
NAME OF COMPANY REPRESENTATIVE AUTHORIZED TO	BE IN CHARGE OF PLUGGING OPERATIONS:
Leo Swords	ADDRESS Box 288, Russell, KS 67665
PLUGGING CONTRACTOR <u>Murfin Drilling Company</u> ADDRESS <u>617 Union Center Bldg.</u> , Wichita, KS	67202 STATE CORPORATION
INVOICE COVERING ASSESSMENT FOR PLUGGING THIS	S WELL SHOULD BE SENT TO JUL 1 1992
NAMEBeren Corporation	CONSERVA 7-1-57
ADDRESS 970 Fourth Financial Center, Wichita	Wichita, Kansas
AND PAYMENT WILL BE GUARANTEED BY APPLICANT OF ACTING AGENT.	
	SIGNED Wind
	APPLICANT OR ACTING AGENT

APPLICANT OR ACTING AGENT

DATE: __6-22-82

David L. Murfin

STATE OF KANSAS

INVOICE and WELL PLUGGING AUTHORITY

STATE CORPORATION COMMISSION CONSERVATION DIVISION 200 Colorado, Derby Bldg. Wichita, Kansas 67202-1286

June 28, 1982	486–W Invoice Number:
TO: Beren Corporation 970 Fourth Financial Center Wichita, KS. 67202	PAYABLE UPON RECEIP
PLUGGING ASSESSMENT AS FOLLOWS:	
Hartley #1 2310' FSL & 1840' FWL, Sec.12-6S-37W Sherman \$16 Murfin Drlg. Co.	1.20
NOTE: We also need the following before our file is cor	mpleted:
WELL PLUGGING AUTHORITY	
Gentlemen: This is your authority to plug the above subject well in accomporation commission.	cordance with the rules and regulations of the state
This authority is void after ninety (90) days from the abo	Administrator
Mr. Carl Goodrow, Box 189 Penokee Ks.6 is hereby assigned to supervise the pluggi	.7659 (913)674-5593 ng of the above mentioned well.

RETURN PINK COPY WITH REMITTANCE