FORM CP-1

STATE OF KANSAS STATE CORPORATION COMMISSION CONSERVATION DIVISION 500 INSURANCE BUILDING 212 NORTH MARKET WICHITA, KANSAS 67202

WELL PLUGGING APPLICATION FORM File One Copy

15-065-20097-06-00

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10-72-67	

Lease Owner	PAINE DRILLING CO. INC.	
		ıs
		Well No. 2
		Twp. 7 Rge. 25 (E) (W) W
County	Graham	Field Name (If Any) Wilcox
Total Depth 3	835 Oil Well	Gas Well Input Well SWD Well D & A X
		or Well Log filed with Plugging Supervisor
Date and hour pl	ugging is desired to begin	8:00 PM October 18, 1967
		nce with the Rules and Regulations of the State
Corporation Comm		
Name of company	representative in charge of [olugging operations Lyle D. Born
		Address P O Box D, Hill City, Kansas
		mpany License No.
	Hill City, Kansas	
		well should be sent to PAINE DRILLING GO., INC.
		Address P. O. Box D, Hill City, Kansas 67642
and payment will	be guaranteed by applicant.	Signed: Louis Edgett
		Applicant or Acting Agent
		Date:October 19, 1967



15-065-20097-00-00

State Corporation Commission

CONSERVATION DIVISION

(Oil, Gas and Water)

500 Insurance Bldg. 212 N. Market WICHITA, KANSAS 67202

ROBERT B. DOCKING
WILLIAM L. MITCHELL
JAMES O. GREENLEAF
DALE E. SAFFELS
RAYMOND B. HARVEY
E. EDWARD JOHNSON
Gon. Counsel

October 23, 1967

WELL PLUGGING AUTHORITY

Well No.
Lease
Description
County
Total Depth

Total Depth Plugging Contractor 2 Wilcox SW SE NW 7-7-25W Graham 3835

Co. Tools

Paine Drilling Co., Inc. P. O. Box "D" Hill City, Kansas 67642 Gentlemen:

This is your authority to plug the above subject well in accordance with the Rules and Regulations of the State Corporation Commission.

This authority is void after 90 days from the above date.

Very truly yours,

J. P. Roberts, Administrator

Mr. W. L. Nichols Box 157 Morland, Kansas is hereby assigned to supervise the plugging of the above named well.