

CARD MUST BE SIGNED

Starting Date:11.....19.....84.....
month day year

API Number 15-207-25,136-00-00

OPERATOR: License #7208.....

...S/2, S~~W~~/4... Sec 32 Twp 23 S, Rge 17 ☒ East
(location) ☐ West

NameLoraine Cleaver.....

Address Box 54.....

City/State/ZipPiqua, KS 66761.....

Contact Person Loraine Cleaver.....

Phone 316.468.2050

CONTRACTOR: License #6056.....

Name Black Diamond Drlg.

City/State Same as above

.....835..... Ft North from Southeast Corner of Section
.....4814..... Ft West from Southeast Corner of Section
(Note: Locate well on Section Plat on reverse side)

Nearest lease or unit boundary line 835 feet.

County Woodson

Lease Name ..Sullivan Bros..... Well# ..18.....

Domestic well within 330 feet : ☐ yes ☒ no

Municipal well within one mile : ☐ yes ☒ no

Depth to Bottom of fresh water20..... feet

Lowest usable water formation

Depth to Bottom of usable water ... 150 feet

Surface pipe by Alternate : 1 ☐ 2 ☒

Surface pipe to be set20..... feet

Conductor pipe if any required feet

Ground surface elevation feet MSL

This Authorization Expires 5-19-85

Approved By 11-19-84 K

If OWWO: old well info as follows:

Operator

Well Name

Comp Date **Old Total Depth**

Projected Total Depth1000..... **feet**

Projected Formation at TD

Expected Producing Formations

I certify that we will comply with K.S.A. 55-101, et seq., plus eventually plugging hole to K.C.C. specifications.

Date 11/19/84 Signature of Operator or Agent Samuel Gibbs Title _____

.....As agent.....

Form C-1 4/84

Form C-1
MHC/KONE 11/19/84

STAIR

501 9 1984

11-19-84

Important procedures to follow :

- 1. Notify District office before setting surface casing.**
- 2. Set surface casing by circulating cement to the top.**
- 3. File completion forms ACO-1 with K.C.C. within 90 days of well completion, following instructions on ACO-1, side 1, and including copies of wireline logs.**
- 4. Notify District office 48 hours prior to old well workover or re-entry.**
- 5. Prior to plugging, prepare a plugging plan, then obtain agreement from the appropriate district office for an approved plugging plan.**
- 6. Submit plugging report (CP-4) to K.C.C. after plugging is completed.**
- 7. Obtain an approved injection docket number before disposing of salt water.**
- 8. Notify K.C.C. within 10 days when injection commences or terminates.**
- 9. If an alternate 2 completion, cement in the production pipe from below any usable water to surface within 120 days of spud date.**

**State Corporation Commission of Kansas
Conservation Division
200 Colorado Derby Building
Wichita, Kansas 67202
(316) 263-3238**