

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 # 15-073-22191-00-00 Identifier number of this well). This must be listed for wells drilled since 1967; if no API# was issued, indicate spud or completion date.

WELL OPERATOR Evans Oil, Inc. KCC LICENSE # 6078
(owner/company name) (operator's)

ADDRESS P O Box 67 CITY Lebo

STATE Kansas ZIP CODE 66856 CONTACT PHONE # (620) 437-2595

LEASE Harshman WELL# 3 SEC. 8 T. 23 R. 13 (East/West)

- NE - SE - SE SPOT LOCATION/QQQQ COUNTY Greenwood

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

330 FEET (in exact footage) FROM E/W (circle one) LINE OF SECTION (NOT Lease Line)

Check One: OIL WELL GAS WELL D&A SWD/ENHR WELL DOCKET# _____

CONDUCTOR CASING SIZE NA SET AT _____ CEMENTED WITH _____ SACKS

SURFACE CASING SIZE 8 5/8" SET AT 50' CEMENTED WITH NA SACKS

PRODUCTION CASING SIZE 4 1/2" SET AT 1826' CEMENTED WITH NA SACKS

LIST (ALL) PERFORATIONS and BRIDGEPLUG SETS: 1797'-1804' 8 shots

ELEVATION NA T.D. 1830' PBTD 1826' ANHYDRITE DEPTH NA
(G.L./K.B.) (Stone Corral Formation)

CONDITION OF WELL: GOOD POOR CASING LEAK JUNK IN HOLE

PROPOSED METHOD OF PLUGGING Spot plugs down 2 3/8" tubing as follows:

20sxs @ 1700', Perforate 2 shots @ 800', 25sxs @ 800', Perforate 2

shots @ 150', 34 sxs @ 150' to surface

(If additional space is needed attach separate page)

IS WELL LOG ATTACHED TO THIS APPLICATION AS REQUIRED? Yes IS ACO-1 FILED? NA

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:

Clifford Schankie PHONE# (620) 437-2595

ADDRESS P O Box 397 City/State Madison, KS 66860

PLUGGING CONTRACTOR Schankie Well Service, Inc. KCC LICENSE # 8470
(company name) (contractor's)

ADDRESS P O Box 397 Madison, KS 66860 PHONE # (620) 437-2595

PROPOSED DATE AND HOUR OF PLUGGING (If Known?) 7-27-06 8:00 AM

PAYMENT OF THE PLUGGING FEE (K.A.R. 82-3-118) WILL BE GUARANTEED BY OPERATOR OR AGENT

DATE: 7-27-06 AUTHORIZED OPERATOR/AGENT: Clifford Schankie
(signature)

* Well already plugged - KCC-Dlg

RECEIVED

SEP 07 2006

KCC WICHITA

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