KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

WELL PLUGGING APPLICATION
Please TYPE Form and File ONE Copy

API # __15__ - __007__-__23074__-__0000__ _____ *(Identifier Number of this well).* This must be listed for wells drilled since 1967; if no API # was issued,

indicate original spud or completion date __Spud 10/25/06__ .

Well Operator: __Raymond Oil Company, Inc.__ KCC License #: __5046__
(Owner / Company Name) *(Operator's)*

Address: __PO Box 48788__ City: __Wichita__

State: __Kansas__ Zip Code: __67201__ Contact Phone: __(316) 267-4214__

Lease: __Rogers__ Well #: __1__ Sec. __11__ Twp. __32__ S. R. __14__ ☐ East ☒ West

__S/2__ - __S/2__ - __NE__ - __NE__ Spot Location / QQQQ County: __Barber County, Kansas__

__1250'__ Feet *(in exact footage)* From ☒ North / ☐ South *(from nearest outside section corner)* Line of Section *(Not Lease Line)*

__660__ Feet *(in exact footage)* From ☒ East / ☐ West *(from nearest outside section corner)* Line of Section *(Not Lease Line)*

Check One: ☐ Oil Well   ☐ Gas Well   ☒ D&A   ☐ Cathodic   ☐ Water Supply Well

☐ SWD Docket # _____   ☐ ENHR Docket # _____   ☐ Other: _____

Conductor Casing Size: _____ Set at: _____ Cemented with: _____ Sacks

Surface Casing Size: __8-5/8"__ Set at: __341'__ Cemented with: __200__ Sacks

Production Casing Size: _____ Set at: _____ Cemented with: _____ Sacks

List *(ALL)* Perforations and Bridgeplug Sets: _____

Elevation: __1659__ (☒ G.L. / ☐ K.B.) T.D.: __4700'__ PBTD: _____ Anhydrite Depth: _____
(Stone Corral Formation)

Condition of Well: ☒ Good   ☐ Poor   ☐ Casing Leak   ☐ Junk in Hole

Proposed Method of Plugging *(attach a separate page if additional space is needed):* __According to the rules and regulations__
of the State of Kansas Corporation Commission

Is Well Log attached to this application as required? ☐ Yes ☐ No   Is ACO-1 filed? ☒ Yes ☐ No

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: __Clarke Sandberg, Geologist__

__Raymond Oil Company, Inc.__ Phone: __(316) 267-4214__

Address: __PO Box 48788__ City / State: __Wichita, KS__

Plugging Contractor: __Duke Drilling__ KCC License #: __5929__
(Company Name) *(Contractor's)*

Address: __PO Box 823   Great Bend, KS   67530__ Phone: __(316) 267 1331__

Proposed Date and Hour of Plugging *(if known?):* __1:30 AM 11-06-06__

Payment of the Plugging Fee (K.A.R. 82-3-118) will be guaranteed by Operator or Agent

Date: __11/13/2006__ Authorized Operator / Agent: _____
(Signature)

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

Dist 01

* Well already plugged - Kee - D/g

RECEIVED
NOV 14 2006
KCC WICHITA