STATE OF KANSAS
STATE CORPORATION COMMISSION
CONSERVATION DIVISION
800 BITTING BUILDING
WICHITA, KANSAS

WELL PLUGGING APPLICATION FORM

Well Location SE NE NW Sec. 16 Twp. 98 Rge. KEY 21 (W)
Field Name (if any) Morel County Graham
Lease (Farm Name) Boland Well No. 2
Was well log filed with application? Yes If not, explain circumstances
and give available data (Use an additional sheet if necessary)
Date and hour plugging is desired to begin 7/23/1944
Plugging of the well will be done in accordance with the Rules and Reg-
ulations of the State Corporation Commission, or with the approval of
the following exceptions: Explain fully any exceptions desired (Use an
additional sheet if necessary)
Name of the person on the lease in charge of well for owner E. F.
Abplanalp Address Moore Hotel, Hill City, Kansas
Name of well owner or Acting Agent Barnett Drilling Company
Address First National Bank Bldg., Wichita, Kansas 8-4-44
Invoice covering assessment for plugging this well should be sent to:
Barnett Drilling CompanyddressFirst Nat'l Bank Bldg., Wichita, Kansas
and payment will be guaranteed by applicant.
Barnett Drilling longon
Operator or Acting Agent
169 21W Date 8-2-44



STATE OF KANSAS STATE CORPORATION COMMISSION

CONSERVATION DIVISION 800 BITTING BUILDING WICHITA 2, KANSAS

July 28, 1944

IN REPLY PLEASE REFER TO THIS SUBJECT

Well No. Farm Description 38 NN 16-9-21W

Soland

Graham County 125-37 File

Barnett Drilling Co. First Mational Bank Bldg. Wichita, 2, Kansas

Gentlemen:

This letter is your permit to plug the above subject well, in accordance with the Rules and Regulations of the STATE CORPORATION COMMISSION.

Yours very truly,

STATE CORPORATION COMMISSION

T. A. MORGAN, DIRECTOR - CONSERVATION DIVISION

JF

NOTICE:

Blaon R. Petty Great Band, Kansas Drg Co.
STATE
CON

STATE OF KANSAS
STATE CORPORATION COMMISSION
CONSERVATION DIVISION
300 BITTING EUILDING
WICHITA, KANSAS

WELL PLUGGING APPLICATION FORM

Well Location SE. NE. Mulsec. 16 Twp. 9 Rgo. 21 (W)
Field Name (if any) County County
Lease (Farm Name) Boltond Well No.
Was well log filed with application? If not, explain circumstances
and give available data (Use an additional sheet if necessary)
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the following exceptions: Explain fully any exceptions desired (Use an
additional sheet if necessary)
Name of the person on the lease in charge of well for owner
Address
Name of well owner or Acting Agent
Address
Invoice covering assessment for plugging this well should be sent to:
Address
and payment will be guaranteed by applicant.
10 The last letter
Operator or Acting Agent
800° -AGE/25/NE 37