Kansas Corporation Commission Oil & Gas Conservation Division

WELL PLUGGING APPLICATION

Please TYPE Form and File ONE Copy

Form CP-1 September 2003 This Form must be Typed Form must be Signed All blanks must be Filled

Well Operator: Dellis Kuber to	indicate original spud or completion date Well Operator: Denis Roberts KCC Lic		
(Own		City: Hays	(Operator's)
Aug. 633.			5 -8526
		Contact Phone: <u>785</u>) 62	
		nnty: Russell County	
	Spot Location / QQQQ Coul	inty: Kusserr Councy	
Feet (in exact footage) From		arest outside section corner) Line of Section	
Feet (in exact footage) From	X East / West (from nea	arest outside section corner) Line of Section	n (Not Lease Line)
Check One: X Oil Well Gas Well	D&A Cathodic	Water Supply Well	
SWD Docket #			
Conductor Casing Size: N/A			
		Cemented with:	
Production Casing Size: 5 1/2	Set at:3298_Ft	Cemented with:	N/A Sac
List (ALL) Perforations and Bridgeplug Sets:	uckle open hole.		
Is Well Log attached to this application as required? If not explain why? Well is to old -	• •		
		ne Rules and Regulations of the State (Corporation Commission.
Plugging of this Well will be done in accordance to List Name of Company Representative authorized to		ons:	
List Name of Company Representative authorized to	o be in charge of plugging operation	ons: Phone:(
List Name of Company Representative authorized to	o be in charge of plugging operation	ons: Phone:	
Address: Plugging Contractor: Doc's Well Service Mid Kan Well Service	o be in charge of plugging operation	ons: Phone:()	(Contractor's)
Address: Plugging Contractor: Doc's Well Service Mid Kan Well Service	o be in charge of plugging operation ce - Russell or preservame)	Ons: Phone: () - City / State: KCC License #: Phone: (785) 324 - 1	(Contractor's)
Address: Plugging Contractor: Doc's Well Service Mid Kan Well Service Address: Proposed Date and Hour of Plugging (if known?):	to be in charge of plugging operations ce - Russell or premerence (Name) March 28, 2007 4/9	ons: — Phone: _((Contractor's) L194
Address: Plugging Contractor: Doc's Well Service Mid Kan Well Service Address: Proposed Date and Hour of Plugging (if known?): Now the Plugging Fee (K.A.R. 82-3-118) with the plugging Fee (K.A.R. 82-3-118	to be in charge of plugging operation of the purpose of the purpos	Ons: ———————————————————————————————————	(Contractor's) L194
Address: Plugging Contractor: Doc's Well Service Mid Kan Well Service Address: Proposed Date and Hour of Plugging (if known?): Note: 2 Payment of the Plugging Fee (K.A.R. 82-3-118) with Date: 2 Payment Operator	to be in charge of plugging operation of the charge of plugging operation of the charge of plugging operation of the charge of t	Ons: Phone: () - City / State: KCC License #: Phone: (785) 324 - 1 (785) 324 - 1 (785) 324 - 1 (81900 AM)	(Contractor's) 1194 RECEIVEI MAR 2 2 20
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