

RECEIVED
09-29-2003
SEP 29 2003

KCC WICHITA

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

API # 15-1163-03432-00-00 (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 _____.

Well Operator: Bowman Oil Company KCC License #: 6931
(Owner / Company Name) (Operator's)

Address: 805 Codell Road City: Codell

State: Kansas Zip Code: 67663 Contact Phone: (785) 434-2286

Lease: Sutor "C" Well #: 1 Sec. 26 Twp. 10 S. R. 20 East West

NW - SW - SE - S/2 SE/4 Spot Location / QQQQ County: Rooks

990 Feet (in exact footage) From North / South (from nearest outside section corner) Line of Section (Not Lease Line)

2310 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: 240 Cemented with: 150 Sacks

Production Casing Size: 5 1/2" Set at: 3768 Cemented with: 150 Sacks

List (ALL) Perforations and Bridgeplug Sets: _____

Elevation: 2217 (G.L. / K.B.) T.D.: 3773 PBDT: _____ 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): will cement well according to KCC Dist # 4 instructions

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: Louis D Bowman &/or Paul H Bowman

Phone: (785) 434-2286

Address: 805 Codell Road City / State: Codell, KS 67663

Plugging Contractor: Allied Cementing Inc KCC License #: _____
(Company Name) (Contractor's)

Address: Russell, Kansas 67665 Phone: (785) 483-2627

Proposed Date and Hour of Plugging (if known?): October 1, 2003

Payment of the Plugging Fee (K.A.R. 82-3-118) will be guaranteed by Operator or Agent
Date: Sept 26, 2003 Authorized Operator / Agent: Jackie Lugholz
(Signature)

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

**NOTICE OF RECEIPT OF WELL PLUGGING APPLICATION (CP-1)**

Bowman Oil Company
805 Codell Rd.
Codell, KS 67663

October 01, 2003

Re: SUTOR C #1
API 15-163-03432-00-00
NWSWSE 26-10S-20W, 990 FSL 2310 FEL
ROOKS COUNTY, KANSAS

Dear Operator:

This letter is to notify you that the Conservation Division is in receipt of your plugging proposal, form CP-1, for the above-captioned well.


Your CP-1 has been reviewed by the Conservation Division central office for completeness and to verify license numbers. The plugging proposal will now be forwarded to the district office listed below for review of your proposed method of plugging.

Please contact the district office for approval of your proposed plugging method at least five (5) days before plugging the well, pursuant to K.A.R. 82-3-113 (b). If a workover pit will be used during the plugging of the well it must be permitted. A CDP-1 form must be filed and approved prior to the use of the pit.

The Conservation Division's review of form CP-1, either in the central or district office, does not include an inquiry into well ownership or the filing operator's legal right to plug the well.

This notice in no way constitutes authorization to plug the above-captioned well by persons not having legal rights of ownership or interest in the well. This notice is void after ninety (90) days from the above date.

District: #4
2301 E. 13th
Hays, KS 67601
(785) 625-0550

Sincerely

David P. Williams
Production Supervisor

ALLIED CEMENTING CO., INC. 14539

Federal Tax I.D.# XXXXXXXXXX

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT: R

15-163-03432-00-00

RECEIVED
OCT 24 2003
KCC WICHITA

DATE <u>10/9/03</u>	SEC.	TWP.	RANGE	CALLED OUT	ON LOCATION <u>8:30A.m</u>	JOB START	JOB FINISH <u>9:30A.m.</u>
LEASE <u>Sutor C</u>		WELL# <u>1</u>	LOCATION <u>Sutor School 2 1/2</u>		COUNTY <u>Reels</u>	STATE <u>KS</u>	
<input checked="" type="radio"/> OLD OR NEW (Circle one)			<u>E In</u>				

CONTRACTOR _____ **OWNER** _____

TYPE OF JOB OHP

HOLE SIZE _____ T.D. _____

CASING SIZE 5 1/2 DEPTH _____

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT _____

CEMENT

AMOUNT ORDERED 300 60/40 10% Gel

20 gel 5 Halls

USED 200psi 20gel 5Halls

COMMON	<u>120</u>	@	<u>7.15</u>	<u>858.00</u>
POZMIX	<u>20</u>	@	<u>3.00</u>	<u>60.00</u>
GEL	<u>34</u>	@	<u>10.00</u>	<u>340.00</u>
CHLORIDE		@		
<u>Halls</u>	<u>5</u>	@	<u>18.00</u>	<u>90.00</u>
		@		
		@		
		@		
		@		
HANDLING	<u>300</u>	@	<u>1.15</u>	<u>345.00</u>
MILEAGE	<u>54/sk/mile</u>			<u>525.00</u>
TOTAL				<u>2462.00</u>

EQUIPMENT

PUMP TRUCK CEMENTER Paul

177 HELPER Shane

BULK TRUCK

213 DRIVER Gary

BULK TRUCK

312 DRIVER Scott

REMARKS:

5 1/2 - mixed 2551 w/ 3 Halls
20 gel and 15051 w/ 1 Hall
press to 1000psi. shut in @
300 psi.
Annulus - 2551 w/ 1 Hall press to
600psi. shut in @ 400psi.

SERVICE

DEPTH OF JOB			
PUMP TRUCK CHARGE			<u>475.00</u>
EXTRA FOOTAGE	@		
MILEAGE	<u>33</u>	@	<u>3.50</u> <u>122.50</u>
PLUG	@		
	@		
	@		
TOTAL <u>597.50</u>			

CHARGE TO: Bowman Oil

STREET _____

CITY _____ STATE _____ ZIP _____

FLOAT EQUIPMENT

_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____

TOTAL _____

To Allied Cementing Co., Inc.
You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

TAX _____

TOTAL CHARGE _____

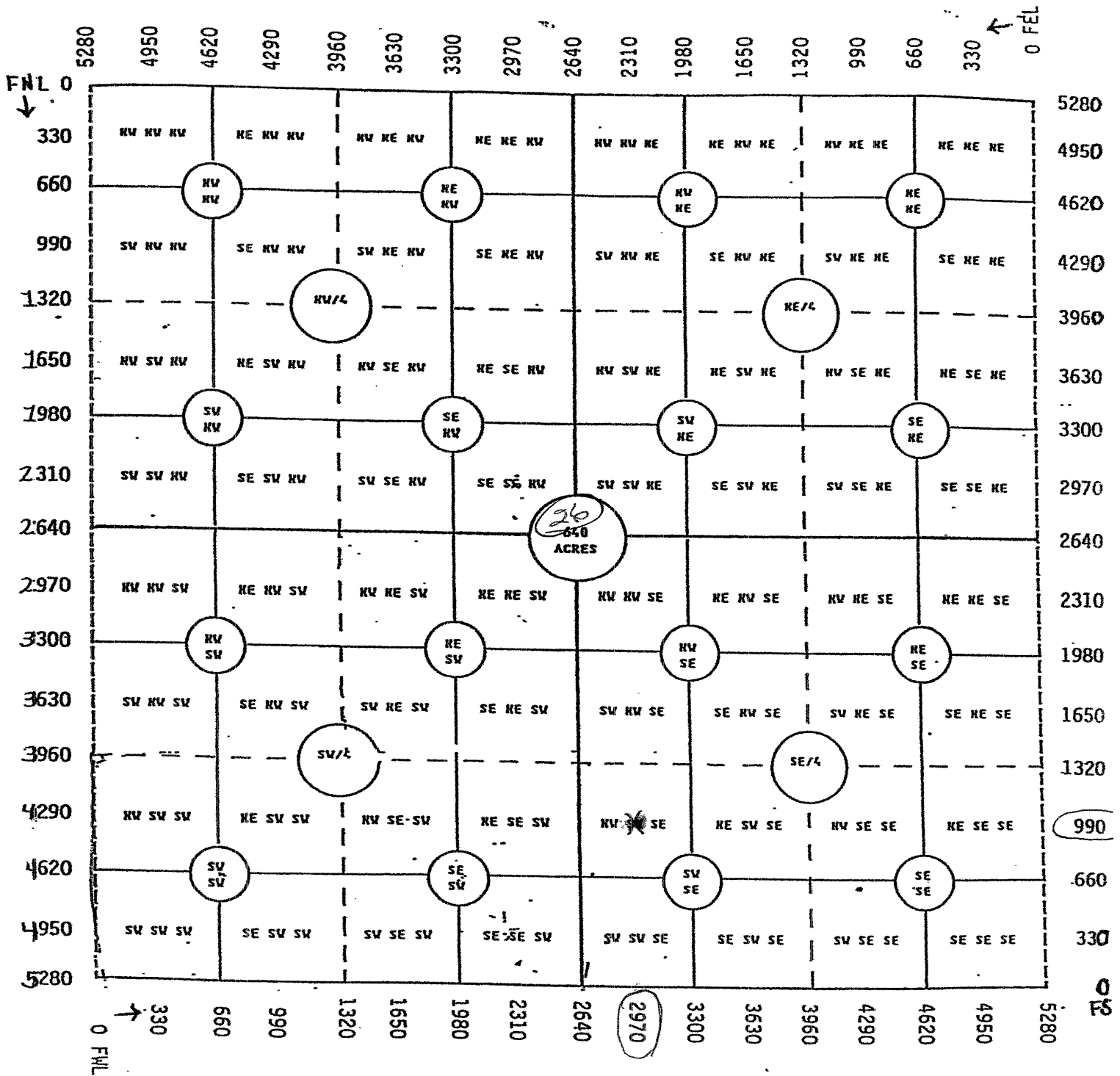
DISCOUNT _____ IF PAID IN 30 DAYS

SIGNATURE _____

Jon Bowman

PRINTED NAME _____

15-163-03432-00-00



Sutor "C" # 1 1/2 of SE/4 Rooks Co, KS 26-10-20w

NW, SW, SE 990 FSL,
 2970 FWL
 2310 FEL
 4290 FNL

RECEIVED
 SEP 29 2003
 KCC WICHITA