

WELL PLUGGING APPLICATION FORM
(File One Copy)

API NUMBER 15-065-22,697 (of this well).

(This must be listed; if no API# was issued, please note drilling completion date.)

WELL OWNER/OPERATOR Paul Bowman Oil Co. OPERATOR'S LICENSE NO. 31008

ADDRESS 99 Peterson, Codel, KS 67630 PHONE # (913) 625-8108

LEASE (FARM) KSU WELL NO. 1 WELL LOCATION NW NW NE COUNTY Graham

SEC. 16 TWP. 10S RGE. 24 ~~24~~ (W) TOTAL DEPTH 4040 PLUG BACK TD 4040

Check One:

OIL WELL GAS WELL D & A SWD or INJ WELL DOCKET NO. _____

SURFACE CASING SIZE 8 5/8 SET AT 264 CEMENTED WITH 195 SACKS

CASING SIZE _____ SET AT _____ CEMENTED WITH _____ SACKS

PERFORATED AT _____

CONDITION OF WELL: GOOD POOR CASING LEAK JUNK IN HOLE

PROPOSED METHOD OF PLUGGING Circulate heavy mud in hole, 1st plug at 2160 w/25 sx; 2nd plug at 1250' w/100 sx; 3rd plug at 280' w/40 sx & 4th plug at 40' to surface w/10 sx,

15 sx in rathole; 190 sx cement 60/40 pozmix w/6% gel & 1/4 sx floseal per sx cement

(If additional space is needed use back of form.)

IS WELL LOG ATTACHED TO THIS APPLICATION AS REQUIRED? No IS ACO-1 FILED? No
(If not explain.) Sent to operator for completion.

DATE AND HOUR PLUGGING IS DESIRED TO BEGIN 12 PM 10-20-92

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.

NAME OF REPRESENTATIVE AUTHORIZED TO BE IN CHARGE OF PLUGGING OPERATION _____

Harold Maley PHONE # (913) 674-5768

ADDRESS 216 E. McFarland, Hill City, KS 67642

PLUGGING CONTRACTOR Abercrombie RTD, Inc. LICENSE NO. 30684

ADDRESS 150 N. Main, #801, Wichita, KS 67202 PHONE # (316) 262-1841

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

SIGNED: Jack K. Atkinson
(Operator or Agent)

DATE: October 30, 1992

RECEIVED
STATE CORPORATION COMMISSION
NOV 11-3-92
3 1992
Wichita, Kansas