

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 # 15-159-21300-00-01 (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 Comp. 6-25-48

Well Operator: Mike Kelso Oil, Inc. KCC License #: 31528
(Owner/Company Name) (Operator's)

Address: P.O. Box 467 City: Chase

State: Kansas Zip Code: 67524 Contact Phone: (620) 938-2943

Lease: Kinemond Well #: 1 Sec. 7 Twp. 18 S. R. 9 East West

SE NE SW Spot Location / QQQQ County: Rice

1550 Feet (in exact footage) From North / South (from nearest outside section corner) Line of Section (Not Lease Line)

2/20 3160 Feet (in exact footage) From East / West (from nearest outside section corner) Line of Section (Not Lease Line)
KCC-Dig

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: 257' Cemented with: 165 Sacks

Production Casing Size: 4-1/2" Set at: 3215' Cemented with: 150 Sacks

List (ALL) Perforations and Bridgeplug Sets: _____

Elevation: 1730 (G.L. / K.B.) T.D.: 3227' PBTD: _____ Anhydrite Depth: 403-422
(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.

RECEIVED
SEP 17 2004
KCC WICHITA

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

If not explain why? Unavailable

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: Mike Kelso

P.O. Box 467 Chase, Kansas 67524 Phone: (620) 562-8088 (cell)

Address: _____ City / State: _____

Plugging Contractor: Mike's Testing & Salvage, Inc. KCC License #: 31529
(Company Name) (Contractor's)

Address: P.O. Box 467 Chase, Kansas 67524 Phone: (620) 938-2943

Proposed Date and Hour of Plugging (if known?): ASAP 3/16/05

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

Date: 9-16-04 Authorized Operator / Agent: [Signature]
(Signature)

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

* Well plugged - KCC-Dig