

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 - 199-20-119 -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 10-25-87

Well Operator: Herman Loeb LLC KCC License #: 3273

Address: PO Box 838 (Owner / Company Name) City: Lawrenceville (Operator's)

State: ILL Zip Code: 62439 Contact Phone: (812) 853 - 3813

Lease: Kraut Krammer Well #: 1-30 Sec. 30 Twp. 15 S. R. 42 East West

NE NE SE Spot Location / QQQQ County: Wallace

2310 Feet (in exact footage) From North / South (from nearest outside section corner) Line of Section (Not Lease Line)

330 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: 424 Cemented with: 250 Sacks

Production Casing Size: 5 1/5 Set at: 5258 Cemented with: 125 Sacks

List (ALL) Perforations and Bridgeplug Sets: 5120-5129

Elevation: 3900 (G.L. / K.B.) T.D.: 5300 PBDT: 5226 Anhydrite Depth: 2776
(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): Per KSCC Instructions

RECEIVED

MAR 12 2009

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

KCC WICHITA

If not explain why? Log previously mailed with ACO-1

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: Shane Pelton

Phone: (719) 340 - 8987

Address: PO Box 792 City / State: Cheyenne Wells, CO 80810

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

Address: Oakley, Ks Phone: (785) 672 - 3471

Proposed Date and Hour of Plugging (if known?): (3-5-09)

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

Date: 3-5-09 Authorized Operator / Agent: _____ (Signature)

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

*Well plugged: KCC - PKT 3

Dist 4
PKT