

**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 # 15-151-21730-0001 (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: Walcher Oil, LC (Owner/Company Name) KCC License #: 33810 (Operator's)

Address: 150 N Main, Ste 809 City: Wichita, KS

State: Kansas Zip Code: _____ Contact Phone: (____) _____

Lease: S & S Unit Well #: 2 Sec. 2 Twp 27 S. R. 13 East West

C - E/2 - SW 15' of Spot Location / QQQQ County: Pratt

1320 Feet (in exact footage) From North / South (from nearest outside section corner) Line of Section (Not Lease Line)

3285 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: 13 3/8" Set at: 242' Cemented with: N/A Sacks _____

Surface Casing Size: 8 5/8" Set at: 1065' Cemented with: N/A Sacks _____

Production Casing Size: 5 1/2" Set at: 4248' Cemented with: 160 Sacks _____

List (ALL) Perforations and Bridgeplug Sets: _____

Elevation: 1923 G.L. / K.B. T.D.: 4412 PBTD: 4252 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) Perf 40' 22'-27', soaked, P 700 & 500' & 500' cemented - Prod. declined, then perf 350-34, Top perfs, test all water.

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: _____

Quality Well Service Phone: (____) _____

Address: 190 W.S. Hwy City / State: Ellinwood, KS 67526

Plugging Contractor: _____ (Company Name) KCC License #: _____ (Corporation)

Address: _____ Phone: (____) _____

Proposed Date and Hour of Plugging (if known?): _____

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

Date: May 19, 2009 Authorized Operator / Agent: Wayne E. Walcher (Signature)

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

RECEIVED
MAY 19 2009
KCC WICHITA

Handwritten initials/signature

KANSAS

CORPORATION COMMISSION

Mark Parkinson, Governor Thomas E. Wright, Chairman Michael C. Moffet, Commissioner Joseph F. Harkins, Commissioner

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

• WALCHER OIL, LC
150 N MAIN STE 809
WICHITA, KS 67202-1316

May 19, 2009

Re: SS UNIT #2
API 15-151-21730-00-01
2-27S-13W, 1320 FSL 3285 FEL
PRATT COUNTY, KANSAS

Dear Operator:

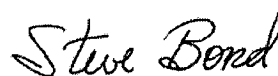
The purpose of this letter is twofold. First, this letter is to notify you that the Conservation Division has received your plugging proposal, form CP-1, for the above well and has reviewed the proposal for completeness. The central office will now forward your CP-1 to the district office listed below for review of the proposed plugging method. **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 in accordance with K.A.R. 82-3-600.**

This letter is also to notify you that during the central office's review of your CP-1 for license number verification, staff has discovered that you are not the current operator of record of the above well on file with the Conservation Division. **Central office staff is therefore requesting that you verify that you are the operator of record of the above well. The proper procedure for verifying operator authority is by filing a Conservation Division form T-1 (Request for Change of Operator; Transfer of Injection or Surface Pit Permit).** If a T-1 has already been filed with the Conservation Division reflecting the transfer of operator authority, please disregard this paragraph. If a T-1 has not been filed reflecting the transfer, please see the attached letter, which explains the T-1 filing process.

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. Furthermore, this notice in no way constitutes authorization to plug the above well by persons not having legal rights of ownership or interest in the well.

This notice is void after November 15, 2009. The CP-1 filing does not bring the above well into compliance with K.A.R. 82-3-111 with regard to the Commission's temporary abandonment requirements.

Sincerely,



Steve Bond

Production Department Supervisor

District: #1
210 E Frontview, Suite A
Dodge City, KS 67801
(620) 225-8888