

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION  
**WELL PLUGGING APPLICATION**  
Please TYPE Form and File ONE Copy

Form CP-1  
March 2009  
This Form must be Typed  
Form must be Signed  
All blanks must be Filled

OPERATOR: License #: 5631  
Name: LOEWEN OPERATOR, INC.  
Address 1: P.O. BOX 335  
Address 2: 208 S. Main  
City: Canton State: KS Zip: 67428 +  
Contact Person: D. LOEWEN, PRES.  
Phone: ( 620 ) 628-4425

API No. 15 - 113-01267-00-00  
If pre 1967, supply original completion date: \_\_\_\_\_  
Spot Description: \_\_\_\_\_  
NW NE SE Sec. 28 Twp. 19 S. R. 2  East  West  
2,267 Feet from  North /  South Line of Section  
1,051 Feet from  East /  West Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
 NE  NW  SE  SW  
County: MCPHERSON  
Lease Name: J.J.KOEHN Well #: 4

Check One:  Oil Well  Gas Well  OG  D&A  Cathodic  Water Supply Well  Other: \_\_\_\_\_  
 SWD Permit #: D-27,579  ENHR Permit #: \_\_\_\_\_  Gas Storage Permit #: \_\_\_\_\_  
Conductor Casing Size: - Set at: - Cemented with: - Sacks  
Surface Casing Size: 8 5/8 Set at: 160 FEET Cemented with: 125 Sacks  
Production Casing Size: 5 1/2 Set at: 3566 FEET Cemented with: 200 Sacks

List (ALL) Perforations and Bridge Plug Sets:

Elevation: 1551 ( G.L. /  K.B.) T.D.: 3566 PBTD: \_\_\_\_\_ Anhydrite Depth: \_\_\_\_\_  
(Stone Corral Formation)

Condition of Well:  Good  Poor  Junk in Hole  Casing Leak at: \_\_\_\_\_  
(Interval)

Proposed Method of Plugging (attach a separate page if additional space is needed):

According to the rules and regulations of the State Corporation Commission.

KANSAS CORPORATION COMMISSION

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

If ACO-1 not filed, explain why:

No logs available.

MAY 15 2009

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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

Company Representative authorized to supervise plugging operations: Douglas D. Loewen, President  
Address: P.O. Box 335 City: Canton State: Ks Zip: 67428 +  
Phone: ( 620 ) 628-4425  
Plugging Contractor License #: 30280 Name: Sunflower Well Service, Inc.  
Address 1: P.O. Box 341 Address 2: \_\_\_\_\_  
City: Canton State: Ks Zip: 67428 +  
Phone: ( 620 ) 654-8342  
Proposed Date of Plugging (if known): 5-6-09 800 AM

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

Date: 5-12-2009 Authorized Operator / Agent: Douglas D. Loewen (Signature)

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

\*well plugged - KCC PKT

Dis + 2  
PKT