

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 #: 5055
Name: C.H. TODD, INC
Address 1: 1000 N. TYLER RD. STE. 100
Address 2: _____
City: WICHITA State: KS Zip: 67212 + _____
Contact Person: GORDON STOCKEMER
Phone: (316) 721-2020

API No. 15 - 025-20597-00-00
If pre 1967, supply original completion date: _____
Spot Description: 2310 FT S 990 FT E
NW-NE-SE Sec. 22 Twp. 34 S. R. 21 East West
2,310 Feet from North / South Line of Section
990 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: CLARK
Lease Name: BARBY-HARPER Well #: 7-22

Check One: Oil Well Gas Well OG D&A Cathodic Water Supply Well Other: _____
 SWD Permit #: _____ ENHR Permit #: _____ Gas Storage Permit #: _____
Conductor Casing Size: 13-3/8 Set at: 355 Cemented with: 800 Sacks
Surface Casing Size: 8-5/8 Set at: 855 Cemented with: 600 Sacks
Production Casing Size: 5-1/2 Set at: 5545 Cemented with: 300 EST. Sacks

List (ALL) Perforations and Bridge Plug Sets:
4284-88

Elevation: 1777 (G.L. / K.B.) T.D.: 5620 PBTD: 5500 Anhydrite Depth: 850
(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):

PLUG IN ACCORDANCE W/ KCC DISTRICT 1 RECOMENDATIONS.

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

If ACO-1 not filed, explain why:

RECEIVED
SEP 09 2009
KCC WICHITA

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: DAVID B. PAULY
Address: 1000 N. TYLER, SUITE 100 City: WICHITA State: KS Zip: 67212 + _____
Phone: (316) 721-2020
Plugging Contractor License #: KLN 5105 Name: CLARKE CORPORATION
Address 1: PO BOX 187 Address 2: _____
City: MEDICINE LODGE State: KS Zip: 67104 + 0187
Phone: (620) 886-5665
Proposed Date of Plugging (if known): 10/26/2009

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

Date: 09/03/2009 Authorized Operator / Agent: David Pauly Secretary Treasurer
(Signature)

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

Dist 1
PK



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)

C. H. TODD, INC.
1000 N TYLER STE 100
WICHITA, KS 67212-3276

September 16, 2009

Re: BARBY-HARPER #7-22
API 15-025-20597-00-00
22-34S-21W, 2310 FSL 990 FEL
CLARK COUNTY, KANSAS

Dear Operator:

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.**

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. 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 March 15, 2010. 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