



KANSAS CORPORATION COMMISSION 1032317
OIL & GAS CONSERVATION DIVISION

Form CP-1
March 2009

This Form must be Typed
Form must be Signed
All blanks must be Filled

WELL PLUGGING APPLICATION

Please TYPE Form and File ONE Copy

OPERATOR: License #: 6039
Name: L.D. Drilling, Inc.
Address 1: 7 SW 26TH AVE
Address 2: _____
City: GREAT BEND State: KS Zip: 67530 + 6525
Contact Person: Mike Kasselmann
Phone: (620) 793-3051

API No. ~~45~~ - 15-009-24462-00-00
If pre 1967, supply original completion date: 1947
Spot Description: _____
N2-SE NW Sec. 30 Twp. 19 S. R. 12 East West
3,630 Feet from North / South Line of Section
3,300 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Barton
Lease Name: HARRIS B Well #: 8 KCC ASST 4
AKC

Check One: Oil Well Gas Well OG D&A Cathodic Water Supply Well Other: _____
 SWD Permit #: _____ ENHR Permit #: _____ Gas Storage Permit #: _____
Conductor Casing Size: _____ Set at: _____ Cemented with: _____ Sacks
Surface Casing Size: 0 Set at: 0 Cemented with: 0 Sacks
Production Casing Size: 5.5 Set at: 3650 Cemented with: 0 Sacks

List (ALL) Perforations and Bridge Plug Sets:

Perforation Top Perforation Base Formation Bridge Plug Depth

Elevation: 1827 (G.L. / K.B.) T.D.: 3460 3650 P.B.T.D.: _____ 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):

PULL 5.5" CASING AND PLUG AS DIRECTED BY KCC

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

If ACO-1 not filed, explain why:

NO RECORDS

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: MIKE KASSELMAN

Address: 7 SW 26 AVE City: GREAT BEND State: KS Zip: 67530 + _____

Phone: (620) 793-3051

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

Address 1: PO BOX 467 Address 2: _____

City: CHASE State: KS Zip: 67524 + 0467

Phone: (620) 938-2537

Proposed Date of Plugging (if known): _____

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

Submitted Electronically

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

RECEIVED
OCT 22 2009
KCC WICHITA

DUPT 4
AKT



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

October 22, 2009

Mike Kasselmann
L.D. Drilling, Inc.
7 SW 26TH AVE
GREAT BEND, KS 67530-6525

Re: Plugging Application
API 15-009-24462-00-00
HARRIS 8
NW/4 Sec.30-19S-12W
Barton County, Kansas

Dear Mike Kasselmann:

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 April 20, 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,
Production Department Supervisor

cc: District 4

(785) 625-0550