FORM CP-1 September 2003 This Form must be Typed Form must be Signed All Blanks must be filled

WELL PLUGGING APPLICATION

PLEASE TYPE FORM and File ONE Copy

| | 15-115-2035 | 1-0000 | Identifier numbe | r of this well). T | his must be listed for we | lls drilled since 19 | 67; if no API# was issued, |
|---|--|--|--|--|---|--|-------------------------------|
| ndicate spud or cor | mpletion date: | | - | | | | |
| Welll Operator: | · | | | | | KCC LICENSE # 5399 | |
| Addroom 155 No | anth Manlert | (owner/cor | mpany name) | | | Z 142 15 15 1 | (operator's) |
| Address: 155 No State: Kansas | | Zip Code: | 67202 | | Contact Phone | ∕∶ <u>Wichita</u> ⊶ | 316-263-5785 |
| e Lease: SW | | Klassen | 0,202 | Well #: 1 | | | 19S R. 1E |
| NE NE | SW | | | Spot Location/0 | | County | |
| 90 1-21 | Feet (in exact Feet (in exact | | | _ | nearest outside section corr nearest outside section corn | • | • |
| Check One: | المعد لات | | Gas Well | × 708 | A Cathodic | • | Water Supply Well |
| | SWD Docket # | | ENHR Docket # | | | - | vvater Supply vveii |
| | | | | | ·· | | |
| Conductor Casing S | Size: | | Set at: | | Cemented with: | | Sacks |
| Surface Casina Sin | | 0.5(0) | 0-1-4 | 0071 | • | | |
| Surface Casing Size | ₽. | 8 5/8" | _Set at: | 207' | Cemented with: | Unknown | Sacks |
| Production Casing Size: | | 4 1/2" | Set at: | 3306' | Cemented with: | Unknown | Sacks |
| J | | | - | | | | |
| ist (ALL) Perforatio | ons and Bridger | plug Sets: | | | | | |
| | | C : | maan 2200 or | 200/4 CDE | | | |
| | | | mpson - 3299 - 33 | 00 W/4 SPF | | | |
| Elevation: | 1528' KB | | | T.C | D. 3309' PBTE |) : | Anhydrite Depth: |
| | | | | | | (Stone Corr | al Formation) |
| Condition of Well: | | Good | X | Poor | Casing Leak | Junk in Hole | |
| Place 5 or as re | 50' sand plug or ecommended b | ver perfs. F | ill hole with mud a | and set a 35 sx j | plug @ 450' and fill to su | rface with cement | |
| s Well Log attached | | | | | | I- AO | |
| f Not explain why? | | | Currently on file v | vith state | No(Yes/No) | IS ACI | O-1 Filed? Yes (Yes/No) |
| | | | | | | | |
| lugging of this Well | Il will be done in | n accordanc | e with K.S.A. 55-10 | 01 et. Seq. and th | No (Yes/No) ne Rules and Regulations perations: | | |
| lugging of this Well | Il will be done in | n accordanc | e with K.S.A. 55-10 | 01 et. Seq. and th | ne Rules and Regulations | of the State Corpo | oration Commission. |
| lugging of this Well | Il will be done in | n accordanc | e with K.S.A. 55-10 | 01 et. Seq. and th | ne Rules and Regulations | of the State Corpo Doug Ward 620-654-7149 | oration Commission. |
| Plugging of this Well ist Name of Compa | II will be done in any Representa | n accordance | e with K.S.A. 55-10 | 01 et. Seq. and th | ne Rules and Regulations perations: Phone: | of the State Corpo Doug Ward 620-654-7149 State | oration Commission. Kansas |
| lugging of this Well ist Name of Compa Address: | II will be done in any Representa | n accordance ative authori S American E | e with K.S.A. 55-10 ized to be in charg | 01 et. Seq. and the | ne Rules and Regulations perations: Phone: | of the State Corpo Doug Ward 620-654-7149 | Kansas 5399 |
| lugging of this Well ist Name of Compa | II will be done in any Representa | n accordance ative authori S American E | e with K.S.A. 55-10 | 01 et. Seq. and the | ne Rules and Regulations perations: Phone: | of the State Corpo Doug Ward 620-654-7149 State: KCC LICENSE | oration Commission. Kansas |
| Address: | II will be done in any Representa P.O. Box 516 r: ox 516, 136 N. | n accordance ative authori S American E Main | e with K.S.A. 55-10 ized to be in charg Energies Corporat (company | 01 et. Seq. and the | perations: Phone: City: Canton | of the State Corpo Doug Ward 620-654-7149 State: KCC LICENSE | Kansas #: 5399 (contractor's) |
| Plugging of this Well ist Name of Compa Address: Plugging Contractor Address: P.O. Bo | II will be done in any Representa P.O. Box 516 r: ox 516, 136 N. Hour of Pluggir | n accordance ative authori American E Main | e with K.S.A. 55-10 ized to be in charg Energies Corporat (company | 01 et. Seq. and the ge of plugging op ion name) | perations: Phone: City: Canton City: Canton As soon as possible | of the State Corpo Doug Ward 620-654-7149 State: KCC LICENSE | Kansas #: 5399 (contractor's) |

DEC 17 2009



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

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

AMERICAN ENERGIES CORPORATION 155 N MARKET STE 710 WICHITA, KS 67202-1821 December 22, 2009

Re: KLASSEN #1

API 15-115-20351-00-00 27-19S-1E, 990 FSL 990 FWL MARION 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 June 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,

Steve Bond

Steve Bond

Production Department Supervisor

District: #2 3450 N. Rock Road, Suite 601

Wichita, KS 67226

(316) 630-4000