

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 #: 6901
Name: D.S. & W. Well Servicing, Inc.
Address 1: 1822 24th Street
Address 2: _____
City: Great Bend State: KS Zip: 67530 + _____
Contact Person: Edward S. Nemnich
Phone: (620) 793-5838

API No. 15 - 169-20107 - 0000
If pre 1967, supply original completion date: _____
Spot Description: _____
NW. NW. NW. Sec. 29 Twp. 16 S. R. 1 East West
5,076 Feet from North / South Line of Section
5,028 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Saline
Lease Name: Peterson Well #: 1

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: 7" Set at: 137' Cemented with: 65 sacks Sacks
Production Casing Size: 4-1/2" Set at: 2673' Cemented with: 80 sacks Sacks

List (ALL) Perforations and Bridge Plug Sets:

Elevation: 1305' (G.L. / K.B.) T.D.: 2675' PBTD: 2635' 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):

As per KCC orders

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

If ACO-1 not filed, explain why:

N/A

RECEIVED
DEC 28 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: Tim Dickson
Address: 1822 24th Street City: Great Bend State: KS Zip: 67530 + _____
Phone: (620) 793-5838
Plugging Contractor License #: 6901 Name: D.S. & W. Well Servicing, Inc.
Address 1: 1822 24th Street Address 2: _____
City: Great Bend State: KS Zip: 67530 + _____
Phone: (620) 793-5838

Proposed Date of Plugging (if known): ASAP

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

Date: 12/24/2009 Authorized Operator / Agent: Edward S. Nemnich
(Signature)

Dist 2
PRT



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)

D S & W WELL SERVICING, INC.
1822 24TH STREET
GREAT BEND, KS 67530

December 30, 2009

Re: PETERSON #1
API 15-169-20107-00-00
29-16S-1W, 5076 FSL 5028 FEL
SALINE 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 28, 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: #2
3450 N. Rock Road, Suite 601
Wichita, KS 67226
(316) 630-4000