

KANSAS CORPORATION COMMISSION
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

33336

KCCAP

OPERATOR: License #: ~~33217~~ ~~31189~~
Name: ~~Three Rivers Exploration~~ ESS Corp.
Address 1: 538 Rd 20
Address 2: _____
City: Olpe State: Ks Zip: 66865 + _____
Contact Person: David Farthing
Phone: (620) 437-2716

API No. ~~15~~ - 15-073-22163-00-01
If pre 1967, supply original completion date: _____
Spot Description: SW SE SW
_____ Sec. 15 Twp. 23 S. R. 10 East West
330 Feet from North / South Line of Section
1,650 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Greenwood
Lease Name: Bledsoe Well #: 2

Check One: Oil Well Gas Well OG D&A Cathodic Water Supply Well Other: _____
 SWD Permit #: _____ ENHR Permit #: 21357.1 Gas Storage Permit #: _____

Conductor Casing Size: _____ Set at: _____ Cemented with: _____ Sacks
Surface Casing Size: 7" Set at: 101' Cemented with: 60 Sacks
Production Casing Size: 4 1/2 Set at: 2176 Cemented with: 100 Sacks

List (ALL) Perforations and Bridge Plug Sets:

Elevation: 1365 (G.L. / K.B.) T.D.: 2358 PBDT: 2176 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):

50' plug at 2100', 50' at 900', 250' to surface.

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

If ACO-1 not filed, explain why:

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 Farthing

Address: _____ City: _____ State: _____ Zip: _____ + _____

Phone: (620) 437-2716

Plugging Contractor License #: 31878 Name: Jim Snyder Inc.

Address 1: _____ Address 2: _____

City: Hamilton State: Ks Zip: 66853 + _____

Phone: (620) 344-6283

Proposed Date of Plugging (if known): _____

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

Date: 9-14-09 Authorized Operator / Agent: David Farthing
(Signature)

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

Dist. 3
* Well Dr. plugged 9/02/09
No br. req'd

RECEIVED
KANSAS CORPORATION COMMISSION
JAN 25 2010
CONSERVATION DIVISION
WICHITA, KS

Jim Snyder
1/23/10