

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 #: 34081  
Name: Fairfield Energy TM4500 Drilling Rig Joint Venture LLC  
Address 1: 12295 Oracle Blvd.  
Address 2: suite 340  
City: Colorado Springs State: CO Zip: 80921 +  
Contact Person: Ron Banta  
Phone: ( 719 ) 594-6458

API No. ~~15~~ - 15-023-21176-0000  
If pre 1967, supply original completion date: \_\_\_\_\_  
Spot Description: wheat field  
\_\_\_\_ - SE NE Sec. 28 Twp. 4 S. R. 39  East  West  
1,980 Feet from  North /  South Line of Section  
660 Feet from  East /  West Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
 NE  NW  SE  SW  
County: Cheyenne  
Lease Name: Sullivan/Sheriff, Miss Jenny Well #: 22-9

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: \_\_\_\_\_ Set at: \_\_\_\_\_ Cemented with: \_\_\_\_\_ Sacks  
Production Casing Size: \_\_\_\_\_ Set at: \_\_\_\_\_ Cemented with: \_\_\_\_\_ Sacks

List (ALL) Perforations and Bridge Plug Sets:

Elevation: \_\_\_\_\_ (  G.L. /  K.B. ) T.D.: \_\_\_\_\_ 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):

**fill hole with cement and backfill**

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

If ACO-1 not filed, explain why:

RECEIVED  
KANSAS CORPORATION COMMISSION

APR 23 2010

CONSERVATION DIVISION  
WICHITA, KANSAS

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 Simpson

Address: 12295 Oracle Blvd., Ste. 340 City: Colorado Springs State: CO Zip: 80921 +

Phone: ( 719 ) 594-6458

Plugging Contractor License #: UNKNOWN Name: \_\_\_\_\_

Address 1: \_\_\_\_\_ Address 2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ +

Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

Proposed Date of Plugging (if known): 20/11/12/2008

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

Date: 04/20/2010 Authorized Operator / Agent: \_\_\_\_\_ (Signature)

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

Dist. 4

No ltr. - Acc. Plugged

cc  
m