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 #: __33759__

Name: __WINELAND OIL - LLC__

Address 1: __P.O. BOX 53__

Address 2: __304 N. 3RD ST.__

City: __OTIS__ State: __KS__ Zip: __67565__ + __0053__

Contact Person: __LARRY WINELAND__

Phone: (__785__) __387-2385 Cell: (785) 387-1200__

API No. 15 - __163-23102-00-00__

If pre 1967, supply original completion date: __8-17-1990__

Spot Description: _____

__ . NW. NW. NW__ Sec. __6__ Twp. __9__ S. R. __16__ ☐ East ☑ West

__4,880__ Feet from ☐ North / ☑ South Line of Section

__330__ Feet from ☐ East / ☑ West Line of Section

Footages Calculated from Nearest Outside Section Corner:
☐ NE ☐ NW ☐ SE ☑ SW

County: __ROOKS__

Lease Name: __KERN B__ 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: __8 5/8"__ Set at: __208'__ Cemented with: __340__ Sacks

Production Casing Size: __5 1/2 "__ Set at: __3425'__ Cemented with: __120__ Sacks

List *(ALL)* Perforations and Bridge Plug Sets:

PLATSMOUTH 3037, "A" 3114', "C" 3150', "D" 3165', "G" 3212', "I" 3270', "J" 3288', "K" 3316', "L" 3342'

Elevation: __1965__ (☐ G.L. / ☑ K.B.) T.D.: __3425'__ PBTD: __3420'__ Anhydrite Depth: __1268' - 1304'__
(Stone Corral Formation)

Condition of Well: ☐ Good ☐ Poor ☐ Junk in Hole ☑ Casing Leak at: __2600'__
(Interval)

Proposed Method of Plugging *(attach a separate page if additional space is needed)*:

RUN TUBING TO 3250'. MIX & PUMP 50 SACKS CEMENT. 150 SACKS W / 600#. HULLS. PULL TO 1271' MIX 150 SACKS - CIRCULATE TO SURFACE. PULL TUBING. MIX 25 SACKS BRAIDING HEAD. 35 SACKS TO 5 1/2"

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: __DISTRICT #4 / CASE MORRIS__

Address: __2301 EAST 13TH__ City: __HAYS__ State: __KS__ Zip: __67601__ + ____

Phone: (__785__) __625-0550__

Plugging Contractor License #: __32247__ Name: ~~EC & G~~ *CRAWFORD, JEFF* DBA JEFF'S OILWELL SUPERVISION

Address 1: __P.O. BOX 245__ Address 2: _____

City: __NATOMA__ State: __KS__ Zip: __67651__ + ____

Phone: (__785__) __885-8013__

Proposed Date of Plugging *(if known)*: __MAY 31, 2010__

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

Date: __6-1-2010__ Authorized Operator / Agent: *Larry Wineland*
(Signature)

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

Dist. 4   *No ltr. - Alr. Plugged*