

STATE OF KANSAS
STATE CORPORATION COMMISSION
CONSERVATION DIVISION
130 South Market, Room 2078
Wichita, Kansas 67202-3802

FORM CP-1
Rev. 03/92

WELL PLUGGING APPLICATION FORM
(PLEASE TYPE FORM and File ONE Copy)

API # 15-195-22176-0000 (Identifier number of this well). This must be listed for wells drilled since 1967; if no API# was issued, indicate spud or completion date.

WELL OPERATOR Raney Oil Company KCC LICENSE # 31523
(owner/company name) (operator's)

ADDRESS 3425 Tam O'Shanter CITY Lawrence

STATE Kansas ZIP CODE 66047 CONTACT PHONE # (913) 749-0672

LEASE Weber WELL # 2 SEC. 36 T. 13S R. 22 ~~East~~/West)

G- E/2- SE - SPOT LOCATION/OOOO COUNTY Trego County, Kansas

1300 FEET (in exact footage) FROM S/N (circle one) LINE OF SECTION (NOT Lease Line)

640 FEET (in exact footage) FROM S/N (circle one) LINE OF SECTION (NOT Lease Line)

Check One: OIL WELL GAS WELL D&A SWD/ENHR WELL DOCKET# _____

CONDUCTOR CASING SIZE _____ SET AT _____ CEMENTED WITH _____ SACKS

SURFACE CASING SIZE 8-5/8" SET AT 265' CEMENTED WITH 150 SACKS

PRODUCTION CASING SIZE _____ SET AT _____ CEMENTED WITH _____ SACKS

LIST (ALL) PERFORATIONS and BRIDGEPLUG SETS: _____

ELEVATION 2250/2259' T.D. 4210' PBDT 4200' ANHYDRITE DEPTH 1756-1801
(G.L./K.B.) (Stone Corral Formation)

CONDITION OF WELL: GOOD POOR CASING LEAK JUNK IN HOLE

PROPOSED METHOD OF PLUGGING 1st plug 1780' w/ 25 sks thru drill collar

2nd - 850' w/ 100 3rd - 320' w/ 40 4th - 40' w/10 Rathole w/ 15

(If additional space is needed attach separate page)

IS WELL LOG ATTACHED TO THIS APPLICATION AS REQUIRED? yes IS ACO-1 FILED? yes

If not 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.

LIST NAME OF COMPANY REPRESENTATIVE AUTHORIZED TO BE IN CHARGE OF PLUGGING OPERATIONS:

Thomas Raney PHONE# (913) 749-0672

ADDRESS 3425 Tam O'Shanter City/State Lawrence, KS 66047

PLUGGING CONTRACTOR Allied Cementing KCC LICENSE # _____
(company name) (contractor's)

ADDRESS Box 31, Russell, KS PHONE# () _____

PROPOSED DATE AND HOUR OF PLUGGING (If Known?) 9:00 AM 06-25-96

PAYMENT OF THE PLUGGING FEE (K.A.R. 82-3-118) WILL BE GUARANTEED BY OPERATOR OR AGENT

DATE: 7/31/96 AUTHORIZED OPERATOR/AGENT: [Signature]
KANSAS CORPORATION COMMISSION
(signature)

AUG 06 1996
08-06-96
CONSERVATION DIVISION
WICHITA, KS