15-063-00110-00-00

STATE OF KANSAS
STATE CORPORATION COMMISSION
CONSERVATION DIVISION
500 INSURANCE BUILDING
212 NORTH MARKET
WICHITA 2, KANSAS

Form CP-1

WELL PLUGGING APPLICATION FORM
File One Copy

Lease Owner (Applicant) ___ JOHN O. FARMER, INC. ___

Address ___ P.O. Box 352, Russell, Kansas ___

Lease (Farm Name) ___ Werth ___ Well No. ___ 1 ___

Well Location ___ SW SW ___ Sec. ___ 11 ___ Twp. ___ 13s ___ Rge. ___ 26w ___ (E) ___ (W) ___

County ___ Gove ___ Field Name (If any) ___

Total Depth ___ 4490' ___ Oil Well ___ Gas Well ___ Input Well ___ SWD Well ___ D & A ___ X ___

Was well log filed with application? ___ Yes ___ If not, explain: ___

Date and hour plugging is desired to begin ___ Completed: 8:30 P.M. 11/24/64 ___

Plugging of the well will be done in accordance with the Rules and Regulations of the State Corporation Commission.

Name of the person on the lease in charge of well owner ___ Dale Buchheister ___

___ 209 N Washington ___ Address ___ Plainville, Kansas ___

Plugging Contractor ___ John O. Farmer, Inc. ___ License No. ___

Address ___ P.O. Box 352, Russell, Kansas ___

Invoice covering assessment for plugging this well should be sent to ___ John O. Farmer, Inc. ___

___ P.O. Box 352 ___ Address ___ Russell, Kansas ___

and payment will be guaranteed by applicant.

Signed: _John O. Farmer_
Applicant or Acting Agent
President

Date: ___ 11/28/64 ___

15-063-00110-00-00

FORM CP-8

December 2, 1964

WELL PLUGGING AUTHORITY

Well No.   1
Lease   Werth
Description   SW SW 11-13-26W
County   Gove

John O. Farmer Inc.
P. O. Box 352
Russell, Kansas

Gentlemen:

This is your authority to plug the above subject well in
accordance with the Rules and Regulations of the State
Corporation Commission.

This authority is void after 90 days from the above date.

Very truly yours,

J. P. Roberts, Administrator

Mr. _____ W. L. Nichols Morland, Kansas _____
is hereby assigned to supervise the plugging of the above
named well.