

STATE OF KANSAS
STATE CORPORATION COMMISSION
CONSERVATION DIVISION
200 Colorado Derby Building
Wichita, Kansas 67202

FORM CP-1
Rev. 6/4/84

WELL PLUGGING APPLICATION FORM

(File One Copy)

API NUMBER 15-109-80378-00-00 (of this well)

(This must be listed; if no API# was issued, please note drilling completion date.)

LEASE OPERATOR D.G. Hansen Trust OPERATORS LICENSE NO. 5285

P.O. Box 187

ADDRESS Logan, KS 67646 PHONE # (913) 689-4816

C E/2

LEASE (FARM) Stoll WELL NO. 1 WELL LOCATION NE/4 SW/4 COUNTY Logan

SEC. 15 TWP. 13s RGE. 33 ~~(E) or (W)~~ TOTAL DEPTH 4580' PLUG BACK TD _____

Check One:

OIL WELL _____ GAS WELL _____ D & A xx SWD or INJ WELL _____ DOCKET NO. _____

SURFACE CASING SIZE 8 5/8" SET AT 336' CEMENTED WITH 225 SACKS

CASING SIZE _____ SET AT _____ CEMENTED WITH _____ SACKS

PERFORATED AT _____

CONDITION OF WELL: GOOD xx POOR _____ CASING LEAK _____ BUNK IN HOLE

OPERATOR'S SUGGESTED METHOD OF PLUGGING THIS WELL _____

RECEIVED
STATE CORPORATION COMMISSION

12 1985

06-12-85

CONSERVATION DIVISION
Wichita, Kansas

(If additional space is needed use back of form)

IS WELL LOG ATTACHED TO THIS APPLICATION AS REQUIRED? yes IS ACO-1 FILED? attached
(If not, explain)

DATE AND HOUR PLUGGING IS DESIRED TO BEGIN 4:15 a.m. 6/13/85

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.

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

Carl McGuire

PHONE # (913) 885-4387

ADDRESS Box 955, WaKeeney, KS 67672

PLUGGING CONTRACTOR Allied Cementing LICENSE NO. _____

ADDRESS P.O. Box 31, Russell, KS 67665 PHONE # (913) 483-2627

PAYMENT WILL BE GUARANTEED BY OPERATOR OR AGENT SIGNED: Susan I. Smith

(Operator or Agent)

Susan I. Smith

DATE: 6/17/85