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



WELL PLUGGING APPLICATION FORM File One Copy

| Lease Owner | Mutual Oil Co. | |
|---------------------|--|------------------------------------|
| (Applicant) Address | P.O. Box 502, Salina, Kansas. | |
| | Vaupel | |
| | SE- SE- SE- 1- 158ec. 1 Twp. 15 | |
| | Saline Field Name | |
| | 2638' Oil Well Gas Well Inpu | |
| | with application? No | |
| | Operator will file | |
| | | |
| | ging is desired to begin 2/12/62 | |
| Plugging of the we | ll will be done in accordance with the | Rules and Regulations of the State |
| Corporation Commiss | · | |
| Name of the person | on the lease in charge of well owner | loyd A. Marker |
| | | Ist, Natl, Bldg, Wichita, Kansas |
| Plugging Contractor | Donald T. Ingling Drilling Co. | License No. Rotary |
| Address | 615 First Natl, Bldg, Wichita, Kansas | |
| | sessment for plugging this well should | |
| | Address | P.O.Box 502, Salina, Kansas. |
| and payment will be | guaranteed by applicant. | |
| | | |
| | Signed: | oyd A marker |
| | | Applicant or Acting Agent |
| | Date: 2/I2 | /62 |