

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

FORM CP-1 (3/92)

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

API # 171-20,502-00-60 (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 WABASH ENERGY CORPORATION KCC LICENSE # 31251
(owner/company name) (operator's)
ADDRESS P.O. BOX 595 CITY LAWRENCEVILLE
STATE IL ZIP CODE 62439 CONTACT PHONE # () 618-943-3365
LEASE SOCOLOFSKY WELL# 1-9 SEC. 9 T. 17S R. 31 (East/West)
- NW - SE - SE SPOT LOCATION/QQQQ COUNTY SCOTT

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

Check One: OIL WELL GAS WELL D&A SWD/ENHR WELL DOCKET# _____
CONDUCTOR CASING SIZE 8 5/8" SET AT _____ CEMENTED WITH _____
SURFACE CASING SIZE 8 5/8" SET AT 246 CEMENTED WITH 185
PRODUCTION CASING SIZE _____ SET AT _____ CEMENTED WITH 11-01-96

LIST (ALL) PERFORATIONS and BRIDGEPLUG SETS: _____
ELEVATION 2925/2930 T.D. 4671 PBTD _____ ANHYDRITE DEPTH _____
(G.L./K.B.) (Stone Corral Formation)

CONDITION OF WELL: GOOD POOR CASING LEAK JUNK IN HOLE

PROPOSED METHOD OF PLUGGING Fill with heavy mud. 1st plug @ 2310' w/50 sks,
2nd plug @ 1530' w/80 sks,
3rd plug @ 750' w/40 sks,
4th plug @ 40' w/10 sks,
Rathole 15 sks, TOTAL 235' SKS.
(If additional space is needed attach separate page)

IS WELL LOG ATTACHED TO THIS APPLICATION AS REQUIRED? _____ IS ACO-1 FILED? Enclosed
If not explain why? N/A

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:
TONY MARTIN PHONE# () 316-793-4884
ADDRESS P.O. BOX 294, 533 N. MAIN City/State WAKEENEY, KS 67672

PLUGGING CONTRACTOR Abercromble RTD, Inc. KCC LICENSE # 30684
(company name) (contractor's)
ADDRESS 150 No. Main, Ste 801, Wichita, Ks. 67202 PHONE # (316) 262-1841

PROPOSED DATE AND HOUR OF PLUGGING (If Known?) _____

PAYMENT OF THE PLUGGING FEE (K.A.R. 82-3-118) WILL BE GUARANTEED BY OPERATOR OR AGENT
DATE: 10-30-96 AUTHORIZED OPERATOR/AGENT: [Signature]
(signature)