

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

FORM CP-1
Rev. 2/89

WELL PLUGGING APPLICATION FORM
(File One Copy)

API NUMBER 15-101-21,515-00-00 (of this well).

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

WELL OWNER/OPERATOR Slawson Exploration Company, Inc OPERATOR'S LICENSE NO. 3988

ADDRESS 104 S. Broadway Wichita, Kansas 67202 PHONE # (316) 263-3201

LEASE (FARM) SCHADEL "Y" WELL NO. 1 WELL LOCATION SW NW NE COUNTY LANE

SEC. 15 TWP. 17S RGE. 30 (E) or (W) TOTAL DEPTH 4586' 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 410' CEMENTED WITH 215 SACKS

CASING SIZE _____ SET AT _____ CEMENTED WITH _____ SACKS

PERFORATED AT _____

CONDITION OF WELL: GOOD x ~~POOR~~ RECEIVED STATE CORPORATION COMMISSION CASING LEAK _____ JUNK IN HOLE _____

PROPOSED METHOD OF PLUGGING _____ JUN 5 1989

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? by operator _____
(If not explain.)

DATE AND HOUR PLUGGING IS DESIRED TO BEGIN May 30, 1989 5:45 P.M.

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 REPRESENTATIVE AUTHORIZED TO BE IN CHARGE OF PLUGGING OPERATIONS:

Greg Davidson PHONE # (316) 263-3201

ADDRESS Great BEnd, Kansas 67530

PLUGGING CONTRACTOR Allied Cementing LICENSE NO. _____

ADDRESS Russell, Kansas 67665 PHONE # (913) 483-2627

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

SIGNED: [Signature]
(Operator or Agent)

DATE: June 2, 1989