

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 15-101-21,394-00-00 (of this well)
(This must be listed; if no API# was issued, please note drilling completion date.)

LEASE OPERATOR Donald C. Slawson OPERATORS LICENSE NO. 5181

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

LEASE (FARM) Toburen "B" WELL NO. 1 WELL LOCATION N/2 N/2 NW/4 COUNTY Lane

SEC. 29 TWP. 19S RGE. 28 ~~EXOR~~ (W) TOTAL DEPTH 4715' PLUG BACK TO _____

Check One:

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

SURFACE CASING SIZE 8-5/8" SET AT 320' CEMENTED WITH 210 SACKS

CASING SIZE _____ SET AT _____ CEMENTED WITH _____ SACKS

PERFORATED AT _____

CONDITION OF WELL: GOOD XX POOR _____ CASING LEAK _____ JUNK IN HOLE _____

OPERATOR'S SUGGESTED METHOD OF PLUGGING THIS WELL 1st plug @ 2150' w/ 50 sx. 2nd plug @ 1350' w/ 80sx. 3rd plug @ 340' w/ 40 sx. 4th plug @ 40' w/ 10 sx. 15 sx in rathole.

(If additional space is needed use back of form)

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

DATE AND HOUR PLUGGING IS DESIRED TO BEGIN 6-15-87

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:

Bob Rowe PHONE # (316) 263-3201

ADDRESS 200 Douglas Bldg. 104 S. Broadway Wichita, KS 67202

PLUGGING CONTRACTOR Allied Cementing Company LICENSE NO. _____

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

PAYMENT WILL BE GUARANTEED BY OPERATOR OR AGENT SIGNED: William R. Horigan
(Operator or Agent)

DATE: July 9, 1987

RECEIVED
STATE CORPORATION COMMISSION
JUL 15 1987
07-15-1987
CONSERVATION DIVISION
Wichita, Kansas