15-169-19160-00-00

STATE OF KANSAS
STATE CORPORATION COMMISSION
CONSERVATION DIVISION
500 INSURANCE BUILDING
212 NORTH MARKET
WICHITA, KANSAS 67202

FORM CP-1

WELL PLUGGING APPLICATION FORM
File One Copy

Lease Owner _W-D Oil Co_

Address _P O Box H 296 Burlington, Colo. 80807_

Lease (Farm Name) _Richtner_   Well No. _1_

Well Location _S 2 9E_ Sec. _10_ Twp. _16_ Rge. _3_ (Ø) ____ (W) ____

County _Saline_   Field Name (If Any) ____

Total Depth _3302_ Oil Well _X_ Gas Well ____ Input Well ____ SWD Well ____ D & A ____

Well Log filed with application ____ or Well Log filed with Plugging Supervisor ____

_N.A._

Date and hour plugging is desired to begin _Immediately_

Plugging of the well will be done in accordance with the Rules and Regulations of the State

Corporation Commission.

Name of company representative in charge of plugging operations _Don Thompson_

Address _Burlington Colo._

Plugging Contractor _Bert Self_ License No. _48_

Address _R R # 4 Hutchinson, Kans 67501_

Invoice covering assessment for plugging this well should be sent to _Bert Self_

Address _R R # 4 Hutchinson Kas 67501_

and payment will be guaranteed by applicant.

Signed: _Bert Self for_
Don Thompson
Applicant or Acting Agent

Date: _Nov 11, 1969_

State of Kansas

15-169-19160-00-00

State Corporation Commission
CONSERVATION DIVISION
(Oil, Gas and Water)
500 Insurance Bldg.   212 S. Market
WICHITA, KANSAS 67202

November 12, 1969

WELL PLUGGING AUTHORITY

Well No.	1
Lease	Richtner
Description	S/2 SE 10-16-3W
County	Saline
Total Depth	3302
Plugging Contractor	Bert Self

W-D Oil Company
Box 296
Burlington, Colorado 80807

Gentlemen:

This is your authority to plug the above subject well in
accordance with the Rules and Regulations of the State
Corporation Commission.

This authority is void after 90 days from the above date.

Very truly yours,

J. Lewis Brock
J. Lewis Brock, Administrator

Mr. _____ Gilbert Toman   Box 180   Holyrood, Kansas _____
is hereby assigned to supervise the plugging of the above
named well.