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 15-101-21,435-00-00 (of this well)
(This must be listed; if no API# was issued, please note drilling completion date.)

LEASE OPERATOR Landmark Oil Exploration OPERATORS LICENSE NO. 6113

ADDRESS 110 South Main, Suite 510 Wichita, KS. 67202 PHONE # (316) 265-8181

LEASE (FARM) Eitel "B" WELL NO. _____ WELL LOCATION _____ COUNTY Lane

SEC. 16 TWP. 17S RGE. 27W (E)or(W) TOTAL DEPTH 4650' 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 271 CEMENTED WITH 185 SACKS

CASING SIZE _____ SET AT _____ CEMENTED WITH _____ SACKS

PERFORATED AT _____

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

OPERATOR'S SUGGESTED METHOD OF PLUGGING THIS WELL Plug @2120' w/50 sk., 1360' w/80 sk., 300' w/40 sk., 40' w/10 sk., 15 sk. RH, 10 sk. MH. Cement was 60/40 Poz, 6% gel.

(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 8:00 A.M. 12/07/87

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:

Mr. Howard Cain PHONE # (316) 653-2463

ADDRESS P.O. BOx 30 Hoisington, KS. 67544

PLUGGING CONTRACTOR B.J. Titan LICENSE NO. _____

ADDRESS _____ PHONE # ( ) _____

PAYMENT WILL BE GUARANTEED BY OPERATOR OR AGENT SIGNED: _____
(Operator or Agent)

DATE: _____