

WELL PLUGGING APPLICATION FORM
FILE ONE COPY

PI NUMBER 3-2-85 15-101-21132-00-00 (OF THIS WELL)
(THIS MUST BE LISTED, IF NO API# AVAILABLE PLEASE NOTE DRILLING COMPLETION DATE.)

EASE OWNER MCDONALD-WALLACE
ADDRESS 212 N. MARKET, SUITE 509, WICHITA, KANSAS 67202

EASE (FARM NAME) TILLOTSON WELL NO. #2
WELL LOCATION N/12 SW NW SEC. 20 TWP. 16S RGE. 28W (EAST) (WEST)

COUNTY LANE TOTAL DEPTH _____ FIELD NAME _____
OIL WELL _____ GAS WELL _____ INPUT WELL _____ STD WELL _____ D&A _____ DRY HOLE _____

WELL LOG ATTACHED WITH THIS APPLICATION AS REQUIRED? _____ LOG IS ATTACHED _____
(IF NOT STATE REASON WHY)

DATE AND HOUR PLUGGING IS DESIRED TO BEGIN 1:00 A.M. 3-2-85

PLUGGING OF THIS WELL WILL BE DONE IN ACCORDANCE WITH K.S.A. 55-128 OF THE RULES AND REGULATIONS OF THE STATE CORPORATION COMMISSION

NAME OF COMPANY REPRESENTATIVE AUTHORIZED TO BE IN CHARGE OF PLUGGING OPERATIONS:
STATE PLUGGER NOT PRESENT ADDRESS _____

PLUGGING CONTRACTOR ALLIED CEMENTING LICENSE NO. _____
ADDRESS NESS CITY, KANSAS

INVOICE COVERING ASSESSMENT FOR PLUGGING THIS WELL SHOULD BE SENT TO:
NAME MCDONALD-WALLACE
ADDRESS 212 N. MARKET, SUITE 509, WICHITA, KS. 67202

MAR 07 1985

AND PAYMENT WILL BE GUARANTEED BY APPLICANT OR ACTING AGENT.

SIGNED: [Signature]
APPLICANT
WAYNE L. KIRKMAN
PRESIDENT
3-5-85