

**WELL PLUGGING APPLICATION FORM**  
(PLEASE TYPE FORM and File ONE Copy)

API # 15-165-21674-0000 (Identifier number of this well). This must be listed for wells drilled since 1967; if no API# was issued, indicate spud or completion date.

WELL OPERATOR CORONADO OIL & GAS, INC. KCC LICENSE # 6141  
(owner/company name) (operator's)

ADDRESS P.O. Box 1285 CITY Great Bend

STATE KS ZIP CODE 67530 CONTACT PHONE # (316) 792-6702

LEASE DECHANT A WELL# 1 SEC. 20 T. 16 R. 18W (East/West)

70'E-N/2-NE-SE SPOT LOCATION/QQQQ COUNTY Rush

2310 FEET (in exact footage) FROM (S)/N (circle one) LINE OF SECTION (NOT Lease Line)

590 FEET (in exact footage) FROM (E)/W (circle one) LINE OF SECTION (NOT Lease Line)

Check One: OIL WELL  GAS WELL  D&A  SWD/ENHR WELL  DOCKET# \_\_\_\_\_

CONDUCTOR CASING SIZE -- SET AT \_\_\_\_\_ CEMENTED WITH \_\_\_\_\_ SACKS

SURFACE CASING SIZE 8-5/8 SET AT 1134' CEMENTED WITH 425 SACKS

PRODUCTION CASING SIZE -- SET AT \_\_\_\_\_ CEMENTED WITH \_\_\_\_\_ SACKS

LIST (ALL) PERFORATIONS and BRIDGEPLUG SETS: --

ELEVATION 1996/2001 T.D. 3610' PBTD -- ANHYDRITE DEPTH 1153'-1197'  
(G.L./K.B.) (Stone Corral Formation)

CONDITION OF WELL: GOOD  POOR  CASING LEAK  JUNK IN HOLE

PROPOSED METHOD OF PLUGGING per KCC's recommendation

(If additional space is needed attach separate page)

IS WELL LOG ATTACHED TO THIS APPLICATION AS REQUIRED? yes ACCORDING TO FILED? herewith

If not explain why? \_\_\_\_\_

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.

LIST NAME OF COMPANY REPRESENTATIVE AUTHORIZED TO BE IN CHARGE OF PLUGGING OPERATIONS:

ALLEN DRILLING COMPANY PHONE# ( ) 316/793-3582

ADDRESS P.O. Box 1389, Great Bend City/State KS 67530

PLUGGING CONTRACTOR ALLEN DRILLING COMPANY KCC LICENSE # 5418  
(company name) (contractor's)

ADDRESS P.O. Box 1389, Great Bend, KS 67530 PHONE # ( ) 316/793-3582

PROPOSED DATE AND HOUR OF PLUGGING (If Known?) Completed 12/11/94 7:20 AM

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

DATE: 1-4-95 AUTHORIZED OPERATOR/AGENT: [Signature]  
(signature)