

WELL PLUGGING APPLICATION FORM
(File One Copy)

API NUMBER 15-109-20,530-0000 (of this well).
(This must be listed; if no API# was issued, please note drilling completion date.)

WELL OWNER/OPERATOR A. L. Abercrombie, Inc. OPERATOR'S LICENSE NO. 5393

ADDRESS 150 N. Main, Suite 801, Wichita, KS 67202 PHONE # (316) 262-1841

LEASE (FARM) D & L Hubert Enterprises WELL NO. #2 WELL LOCATION 110' S & 110' W of NE NE NW COUNTY Logan

SEC. 29 TWP. 11S RGE. 33 (E) or (W) TOTAL DEPTH 4745' PLUG BACK TD _____

Check One:

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

SURFACE CASING SIZE 8 5/8" SET AT 307.19' CEMENTED WITH 60-40 posmix-200 SACKS

CASING SIZE _____ SET AT _____ CEMENTED WITH _____ SACKS

PERFORATED AT _____

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

PROPOSED METHOD OF PLUGGING Fill w/heavy mud; set 1st plug @ 2630' w/25 sx; 2nd plug @

1630' w/100 sx; 3rd plug @ 360' w/40 sx; 4th plug @ 40' w/10 sx w/wiper plug. Rathole 15

sx; total 190 sx 60-40 posmix 6% gel 1/4# Flocel per sx.

(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 12:00 p.m. 3-19-92

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 REPRESENTATIVE AUTHORIZED TO BE IN CHARGE OF PLUGGING OPERATIONS:

Harold Maley PHONE # (913) 674-5768

ADDRESS 216 E. McFarland, Hill City, KS 67642

PLUGGING CONTRACTOR Abercrombie RTD, Inc. LICENSE NO. 30684

ADDRESS 150 N. Main, Suite 801, Wichita, KS 67202 PHONE # (316) 262-1841

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

SIGNED: Jack S. Wharton
(Operator or Agent)

DATE: April 23, 1992

RECEIVED
STATE CORPORATION COMMISSION
APR 30 1992
CONSERVATION DIVISION
Wichita, Kansas