

STATE OF KANSAS
STATE CORPORATION COMMISSION
CONSERVATION DIVISION
130 South Market, Room 2078
Wichita, Kansas 67202-3802

FORM CP-1
Rev.03/92

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

API # 15-165-21690 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 Liboc, Inc. KCC LICENSE # 31741
(owner/company name) (operator's)

ADDRESS 3300 S. Parker Road - Suite 206 CITY Aurora

STATE Colorado ZIP CODE 80014 CONTACT PHONE # (303) 671-6737

LEASE Legleiter WELL # 1-10 SEC. 10 T. 16S R. 18 ~~XXXX~~ West)

NW - NW - SE - SPOT LOCATION/OOOO COUNTY Rush County, Kansas

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

2310 FEET (in exact footage) FROM S/N (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 1080.58 CEMENTED WITH 375 SACKS

PRODUCTION CASING SIZE _____ SET AT _____ CEMENTED WITH _____ SACKS

LIST (ALL) PERFORATIONS and BRIDGEPLUG SETS: _____

ELEVATION 1931/1940 T.D. 3660' PBDT _____ ANHYDRITE DEPTH 1061-1100'
(G.L./K.B.) (Stone Corral Formation)

CONDITION OF WELL: GOOD POOR CASING LEAK JUNK IN HOLE

PROPOSED METHOD OF PLUGGING 1st plug: 1110' w/50 sacks cement thru drill pipe; 2nd plug: 500' w/ 50
3rd plug: 40' w/10; rathole w/15

(If additional space is needed attach separate page)

IS WELL LOG ATTACHED TO THIS APPLICATION AS REQUIRED? yes IS ACO-1 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:
Rex H. Paullus, Jr. PHONE# (303) 671-6737

ADDRESS 3300 South Parker Road, Suite 206 City/State Aurora, CO

PLUGGING CONTRACTOR Duke Drilling Co., Inc. KCC LICENSE # 5929
(company name) (contractor's)

ADDRESS 310 West Central Suite 202 PHONE# (316) 267-1331

PROPOSED DATE AND HOUR OF PLUGGING (If Known?) 1:00am 12-03-95

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

DATE: 1-11-95 AUTHORIZED OPERATOR/AGENT: [Signature]
(signature)

1-19-96