Rev. 6-3-74 FORM CP-1

## STATE OF KANSAS STATE CORPORATION COMMISSION CONSERVATION DIVISION P. O. BOX 17027 WICHITA, KANSAS 67217

RECEIVED

STATE CORPORATION COMMISSION

UCT 3 \cap 1974

CONSERVATION DIVISION

Wichita, Kansas

WELL PLUGGING APPLICATION FORM
File One Copy

**API Number** Lease Owner Address Well No. Lease (Farm Name) Sec. Field Name Flymmer Total Depth Gas Well Input Well SWD Well Rotary D & A Well Log attached with this application as required with this application as required Date and hour plugging is desired to begin 10-23-74 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: ervice License No. 865 Plugging Contractor ansas Invoice covering assessment for plugging this well should be sent to: Address and payment will be guaranteed by applicant or acting agent.



## State Corporation Commission

## CONSERVATION DIVISION

(OE, Gas and Water)
P. O. Box 17027 3630 S. Moridian
WICHITA, KANSAS 67217

October 30, 1974

## WELL PLUGGING AUTHORITY

Well No.

Lease

Description

County

Total Depth

Plugging Contractor

1

Myers

SE SW NE 2-31-2W

Summer 3303

B & S Well Serv.

W. D. Short Box 45 Oxford, Kansas 67119

Gentlemen:

This is your authority to plug the above subject well in accordance with the Rules and Regulations of the State Corporation Commission.

This authority is void after 90 days from the above date.

Yours very truly,

J Lewis Brock, Administrator

Mr. Rugene H. Graham, Rox 132, Winfield, Kansas 67156 is hereby assigned to supervise the plugging of the above named well.