

TYPE OR PRINT  
 NOTICE: Fill out completely  
 and return to Cons. Div.  
 office within 30 days.

LEASE NAME Schlitter  
 WELL NUMBER 1  
2970 Ft. from S Section Line  
990 Ft. from E Section Line  
 SEC. 18 TWP. 16 RGE. 17 (E) or (W)  
 COUNTY Rush  
 Date Well Completed 6-20-63  
 Plugging Commenced 1/13/94  
 Plugging Completed 1/13/94

LEASE OPERATOR AFG Energy Inc.  
 ADDRESS P.O. Box 458 Hays, Ks. 67601-0458  
 PHONE# (913) 625-6374 OPERATORS LICENSE NO. 03456

Character of Well Gas  
 (Oil, Gas, D&A, SWD, Input, Water Supply Well)

The plugging proposal was approved on 1/11/94 (date)  
 by Dewayne Rankin (KCC District Agent's Name).

Is ACO-1 filed? Yes if not, is well log attached? \_\_\_\_\_

Producing Formation L-KC - Top Depth to Top 2992 Bottom 3343 T.O. 3410

Show depth and thickness of all water, oil and gas formations.

OIL, GAS OR WATER RECORDS

CASING RECORD

Formation	Content	From	To	Size	Put in	Pulled out
Topeka	Gas & water	2992	2998	8 5/8"	951	None
L-KC	Gas & water	3173	3343	4 1/2"	3558	None

Describe in detail the manner in which the well was plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. If cement or other plug were used, state the character of same and depth placed, from feet to feet each set  
Hooked to 4 1/2" casing. Mixed 190 sx. 65/35 Poz., 8% gel. Mixed 400# hulls. Pumped down 4 1/2" hole loaded at 160 sx. Press. to 500#. SIP - 50#. Hooked to 8 5/8" casing. Mixed 160 sx. 65/35 Poz., 8% gel. Had 50#. ISIP - 50#. Did not go on vacuum.

Name of Plugging Contractor Allied Cementing License No. RECEIVED

Address Russell, Ks. 67665

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: AFG Energy Inc.

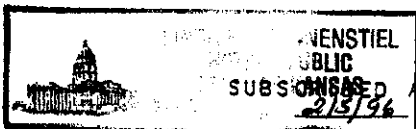
STATE OF Kansas COUNTY OF Ellis, ss.

RECEIVED  
 STATE CORPORATION COMMISSION  
 JAN 18 1994  
 01-18-1994  
 CONSERVATION DIVISION  
 Wichita, Kansas

Terry W. Piesker (Employee of Operator) or (Operator) of above-described well, being first duly sworn on oath, says: That I have knowledge of the facts statements, and matters herein contained and the log of the above-described well as filed the same are true and correct, so help me God.

(Signature) Terry W. Piesker

(Address) P.O. Box 458 Hays, Ks. 67601-0458



AND SWORN TO before me this 13th day of January, 19 94

Jude A. Jannett  
 Notary Public

My Commission Expires: 2/5/96

USE ONLY ONE SIDE OF EACH FORM

STATE OF KANSAS  
STATE CORPORATION COMMISSION  
CONSERVATION DIVISION  
200 Colorado Derby Building  
Wichita, Kansas 67202

FORM CP-1  
Rev.03/92

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

API # \_\_\_\_\_ (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 \_\_\_\_\_ KCC LICENSE # \_\_\_\_\_  
(owner/company name) (operator's)

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_

STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_ CONTACT PHONE # ( ) \_\_\_\_\_

LEASE \_\_\_\_\_ WELL# \_\_\_\_\_ SEC. \_\_\_\_\_ T. \_\_\_\_\_ R. \_\_\_\_\_ (East/West)

\_\_\_\_\_ SPOT LOCATION/QQQQ COUNTY \_\_\_\_\_

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

\_\_\_\_\_ 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 \_\_\_\_\_ SET AT \_\_\_\_\_ CEMENTED WITH \_\_\_\_\_ SACKS

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

LIST (ALL) PERFORATIONS and BRIDGEPLUG SETS: \_\_\_\_\_

ELEVATION \_\_\_\_\_ T.D. \_\_\_\_\_ PBD \_\_\_\_\_ ANHYDRITE DEPTH \_\_\_\_\_  
(G.L./K.B.) (Stone Corral Formation)

CONDITION OF WELL: GOOD \_\_\_\_\_ POOR \_\_\_\_\_ CASING LEAK \_\_\_\_\_ JUNK IN HOLE \_\_\_\_\_

PROPOSED METHOD OF PLUGGING \_\_\_\_\_

(If additional space is needed attach separate page)

IS WELL LOG ATTACHED TO THIS APPLICATION AS REQUIRED? \_\_\_\_\_ IS ACO-1 FILED? \_\_\_\_\_

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:

\_\_\_\_\_ PHONE# ( ) \_\_\_\_\_

ADDRESS \_\_\_\_\_ City/State \_\_\_\_\_

PLUGGING CONTRACTOR \_\_\_\_\_ KCC LICENSE # \_\_\_\_\_  
(company name) (contractor's)

ADDRESS \_\_\_\_\_ PHONE # ( ) \_\_\_\_\_

PROPOSED DATE AND HOUR OF PLUGGING (If Known?) \_\_\_\_\_

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

DATE: \_\_\_\_\_ AUTHORIZED OPERATOR/AGENT: \_\_\_\_\_

(signature)