

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 # 15-101-217310000 (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 Ritchie Exploration, Inc. KCC LICENSE # 4767
(owner/company name) (operator's)
ADDRESS 125 N. Market - Suite 1000 CITY Wichita
STATE Kansas ZIP CODE 67202 CONTACT PHONE # (316) 267-4375
LEASE West-32C WELL# 1 SEC. 32 T. 19S R. 27 XXXXc/West
- NW - SW - SW SPOT LOCATION/QQQQ COUNTY Lane

990 FEET (in exact footage) FROM X/N (circle one) LINE OF SECTION (NOT Lease Line)
330 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 212' CEMENTED WITH 150 SACKS
PRODUCTION CASING SIZE _____ SET AT _____ CEMENTED WITH _____ SACKS

LIST (ALL) PERFORATIONS and BRIDGEPLUG SETS: _____
ELEVATION 2671 GL T.D. 4600' PSTD _____ ANHYDRITE DEPTH _____
(G.L./K.B.) (Stone Corral Formation)

CONDITION OF WELL: GOOD POOR CASING LEAK JUNK IN HOLE
PROPOSED METHOD OF PLUGGING Per KCC requirements

(If additional space is needed attach separate page)

IS WELL LOG ATTACHED TO THIS APPLICATION AS REQUIRED? Yes IS ACO-1 FILED? Yes
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:
Roger Lisenby PHONE# () 316-729-0913
ADDRESS P. O. Box 1586 City/State Great Bend, KS 67530

PLUGGING CONTRACTOR White & Ellis Drilling, Inc. KCC LICENSE # 5420
(company name) (contractor's)
ADDRESS P. O. Box 48848 PHONE # () 316-263-1102
Wichita, KS 67201-8848
PROPOSED DATE AND HOUR OF PLUGGING (if known?) 11-27-96 4:00 a.m.

PAYMENT OF THE PLUGGING FEE (K.A.R. 82-3-118) WILL BE GUARANTEED BY OPERATOR OR AGENT
DATE: 12-2-96 AUTHORIZED OPERATOR/AGENT: Michael S. Conardine
(signature)

12-18-96