

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

FORM CP-1 (3/92)

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

API # 15-007-224740000 (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 James B Read Operating, Inc KCC LICENSE # 31297  
(owner/company name) (operator's)

ADDRESS P.O. Box 638 CITY Ardmore

STATE Oklahoma ZIP CODE 73402 CONTACT PHONE # (405) 226-0055

LEASE Hoagland WELL# 2 SEC. 10 T. 32 S. R.14 (East/West)

App - SW - SE - SE SPOT LOCATION/0000 COUNTY Barber

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

1070 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 20" SET AT 43 CEMENTED WITH 6 yds SACKS

SURFACE CASING SIZE 13 3/8 SET AT 117 CEMENTED WITH 75 SACKS

PRODUCTION CASING SIZE 8 5/8 SET AT 1007 CEMENTED WITH 450 SACKS

LIST (ALL) PERFORATIONS and BRIDGEPLUG SETS: none

ELEVATION 1857/ 1870 T.D. 4740 PBD 4740 ANHYDRITE DEPTH \_\_\_\_\_  
(G.L./K.B.) (Stone Corral Formation)

CONDITION OF WELL: GOOD  POOR  CASING LEAK  JUNK IN HOLE

PROPOSED METHOD OF PLUGGING 50sks at 1038', 50 sks at 450', 10 sks at 40'

drill mud below and between plugs

(If additional space is needed attach separate page)

IS WELL LOG ATTACHED TO THIS APPLICATION AS REQUIRED? no IS ACO-1 FILED? yes

If not explain why? logs with ACO-1

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:

James B Read PHONE# 405 226-0055

ADDRESS P.O. Box 638 City/State Ardmore, Okla 73402

PLUGGING CONTRACTOR Eagle Drilling, Inc KCC LICENSE # 5380

ADDRESS 3500 N Rock Rd, #800A, Wichita, Ks PHONE # (316)-636-4279  
(company name) (contractor's)

PROPOSED DATE AND HOUR OF PLUGGING (If Known?) 7/8/95

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

DATE 8/8/95 AUTHORIZED OPERATOR/AGENT: [Signature]  
(signature)