

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 # 15-155-21366 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 Deutsch Oil Company KCC LICENSE # 3865'
(owner/company name) (operator's)

ADDRESS 107 North Market Suite 1115 CITY Wichita

STATE Kansas ZIP CODE 67202 CONTACT PHONE # (316) 267-7551

LEASE Hayes WELL # 1-30 SEC. 30 T. 24S R. 10 (East/West)

NW - NW - NW - SPOT LOCATION/OOOO COUNTY Reno County, Kansas

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

330 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 263 CEMENTED WITH 175 SACKS

PRODUCTION CASING SIZE _____ SET AT _____ CEMENTED WITH _____ SACKS

LIST (ALL) PERFORATIONS and BRIDGEPLUG SETS: _____

ELEVATION 1777/1785 T.D. 3865' PBDT _____ ANHYDRITE DEPTH 1030'
(G.L./K.B.) (Stone Corral Formation)

CONDITION OF WELL: GOOD POOR CASING LEAK JUNK IN HOLE

PROPOSED METHOD OF PLUGGING 35 sx. @ 1450', 35sx. @ 900', 35 sx. @ 315'
25 sx. @ 60', 15 sx. rathole, 10sx. mousehole.

(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:

Kent Deusch PHONE# (316) 267-7551

ADDRESS 107 N. Market, Su. 1115 City/State Wichita, Kansas 67202

PLUGGING CONTRACTOR Allied Cementing Co., Inc. KCC LICENSE # _____
(company name) (contractor's)

ADDRESS Russell Kansas PHONE# () _____

PROPOSED DATE AND HOUR OF PLUGGING (If Known?) 9:45 am 11-11-95

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

DATE: 12-08-95 AUTHORIZED OPERATOR/AGENT: [Signature]

RECEIVED
KANSAS CONSERVATION COMMISSION

DEC 20 1995