



15-007-21932-0000

## Kansas Corporation Commission

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KEITH R. HENLEY CHAIRMAN
RICH KOWALEWSKI COMMISSIONER
MARGALEE WRIGHT COMMISSIONER
JUDITH MCCONNELL
FRANK A. CARO, JR.
GENERAL COUNSEL
HIS NUMBER
HIS NUMBER

CONSERVATION DIVISION SHARI M. FEIST, DIRECTOR 200 Colorado Derby Bidg. 202 W. 1st Street Wichita, KS 67202-1286 (316) 263-3238

MAR 22 '88

December 22, 1987

**EXPIRE**C

WELL PLUGGING NOTICE

Jim Donovan #1 NE NW NE Sec. 22-32S-11W Barber County

Molz Oil Company R. R. 2 Kiowa, KS 67070

Gentlemen:

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

Please contact the district office listed below to review your suggested method of plugging five days prior to plugging the well (KAR-82-3-113).

This notice is void after ninety (90) days from the above date.

Sincerely,

Shari Feis

Director

State Corporation Commission



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

## WELL PLUGGING APPLICATION FORM (File One Copy)

API NUMBER $007-21-932-0000$ (of this well) $6/88$ (This must be listed; if no API# was issued, please note drilling completion date.)	
LEASE OPERATOR Molz Oil Co. OPERATORS LICENSE NO. 6006	
ADDRESS RR2 Kiowa, Ks. 67070 PHONE # (316) 294-4558	
LEASE (FARM) Jim Donovan WELL NO. 1 WELL LOCATION NE-NW-NE COUNTY Barber	
SEC. 22 TWP. 32s RGE. 11 (E) or (W) TOTAL DEPTH 3811 PLUG BACK TD 3808	
Check One:	
OIL WELL GAS WELL _x D & A SWD or INJ WELL DOCKET NO	
SURFACE CASING SIZE 8 5/8 SET AT 280 CEMENTED WITH 200 SACKS	. •
CASING SIZE $4\frac{1}{2}$ SET AT 3596 CEMENTED WITH 100 SACKS	
PERFORATED AT 3592-3594	بالإدران
CONDITION OF WELL: GOOD X POOR CASING LEAK JUNK IN HOLE ON CONDITION OF WELL: GOOD X POOR CASING LEAK JUNK IN HOLE ON CONDITION OF WELL: GOOD X POOR CASING LEAK JUNK IN HOLE ON CONDITION OF WELL: GOOD X POOR CASING LEAK JUNK IN HOLE ON CONDITION OF WELL: GOOD X POOR CASING LEAK JUNK IN HOLE ON CONDITION OF WELL: GOOD X POOR CASING LEAK JUNK IN HOLE ON CONDITION OF WELL: GOOD X POOR CASING LEAK JUNK IN HOLE ON CONDITION OF WELL: GOOD X POOR CASING LEAK JUNK IN HOLE ON CONDITION OF WELL: GOOD X POOR CASING LEAK JUNK IN HOLE ON CONDITION OF WELL: GOOD X POOR CASING LEAK JUNK IN HOLE ON CONDITION OF WELL: GOOD X POOR CASING LEAK JUNK IN HOLE ON CONDITION OF WELL: GOOD X POOR CASING LEAK JUNK IN HOLE ON CONDITION OF WELL: GOOD X POOR CASING LEAK JUNK IN HOLE ON CONDITION OF WELL: GOOD X POOR CASING LEAK JUNK IN HOLE ON CONDITION OF WELL: GOOD X POOR CASING LEAK JUNK IN HOLE ON CONDITION OF WELL: GOOD X POOR CASING LEAK JUNK IN HOLE ON CONDITION OF WELL: GOOD X POOR CASING LEAK JUNK IN HOLE ON CONDITION OF WELL: GOOD X POOR CASING LEAK JUNK IN HOLE ON CONDITION OF WELL: GOOD X POOR CASING LEAK JUNK IN HOLE ON CONDITION OF WELL: GOOD X POOR CASING LEAK JUNK IN HOLE ON CONDITION OF WELL: GOOD X POOR CASING LEAK JUNK IN HOLE ON CONDITION OF WELL: GOOD X POOR CASING LEAK JUNK IN HOLE ON CONDITION OF WELL: GOOD X POOR CASING LEAK JUNK IN HOLE ON CONDITION OF WELL: GOOD X POOR CASING LEAK JUNK IN HOLE ON CONDITION OF WELL: GOOD X POOR CASING LEAK JUNK IN HOLE ON CONDITION OF WELL: GOOD X POOR CASING LEAK JUNK IN HOLE ON CONDITION OF WELL: GOOD X POOR CASING LEAK JUNK IN HOLE ON CONDITION OF WELL: GOOD X POOR CASING LEAK JUNK IN HOLE ON CONDITION OF WELL: GOOD X POOR CASING LEAK JUNK IN HOLE ON CONDITION OF THE POOR CASING LEAK JUNK IN HOLE ON CONDITION OF THE POOR CASING LEAK JUNK IN HOLE ON CONDITION OF THE POOR CASING LEAK JUNK IN HOLE ON CONDITION OF THE POOR CASING LEAK JUNK IN HOLE ON CONDITION OF THE POOR CASING LEAK JUNK IN HOLE ON CONDITION OF THE POOR CASING LEAK JUNK IN HOLE ON CONDITION OF THE POOR CASING LEAK J	
OPERATOR S SUGGESTED METHOD OF PLUGGING THIS WELL Sand from 3808 to 3540 0 9 1901	2
4 sx cement Dump Bailer- 3 Hull-10Jell -110 sx 60_40 POZ CONSTRUCTION DIVISION DI VISIONI DI	
(If additional space is needed use back of form)	
IS WELL LOG ATTACHED TO THIS APPLICATION AS REQUIRED? Yes IS ACO-1 FILED?	
DATE AND HOUR PLUGGING IS DESIRED TO BEGIN 12-28-87	
PLUGGING OF THIS WELL WILL BE DONE IN ACCORDANCE WITH K.S.A. $55-101$ et $\underline{\text{seq}}$ AND THE RULE REGULATIONS OF THE STATE CORPORATION COMMISSION.	S AN
NAME OF COMPANY REPRESENTATIVE AUTHORIZED TO BE IN CHARGE OF PLUGGING OPERATIONS:	
	·
ADDRESS RR2 Kiowa Ks 67070	·
PLUGGING CONTRACTOR Clarke Corp. LICENSE NO. 5105 6 88	
ADDRESS 187 Fowler Medicine Lodge, Ks. 67104 PHONE # (316) 886-5665	<del></del>
PAYMENT WILL BE GUARANTEED BY OPERATOR OR AGENT SIGNED:	
(Operator or Agent)	