

STATE OF KANSAS STATE CORPORATION COMMISSION CONSERVATION DIVISION 130 South Market, Room 2078 Wichita, Kansas 67202-3802

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

API # 15-007-22537 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 McGinness Qil Company of Kansas, Inc. KCC LICENSE # 31881
WELL OPERATOR McGinness Qil Company of Kansas, Inc. (owner/company name) ADDRESS 150 North Main - Suite 1026 KCC LICENSE # (operator's) CITY Wichita
STATE Kansas ZIP CODE 67202 CONTACT PHONE # (316) 267-6065
LEASE <u>Knop</u> WELL # 1 SEC. 1 T. 30S R. 12 KERKY/West)
NE - NW - NE - SPOT LOCATION/0000 COUNTY Barber County, Kansas
4950 FEET (in exact footage) FROM S/N (circle one) LINE OF SECTION (NOT Lease Line)
1650 FEET (in exact footage) FROM E/W (circle one) LINE OF SECTION (NOT Lease Line)
Check One: OIL WELL GAS WELL D&A X SWD/ENHR WELL DOCKET#
CONDUCTOR CASING SIZE SET AT CEMENTED WITH SACKS
SURFACE CASING SIZE 8-5/8" SET AT 353" CEMENTED WITH 225 SACKS
PRODUCTION CASING SIZE SET AT CEMENTED WITH SACKS
LIST (ALL) PERFORATIONS and BRIDGEPLUG SETS:
ELEVATION 1834/1842 T.D. 3875 PBTD 4750 ANHYDRITE DEPTH (Stone Corral Formation)
CONDITION OF WELL: GOOD X POOR CASING LEAK JUNK IN HOLE
PROPOSED METHOD OF PLUGGING 1st plug: 630' w/50 sxs cement through drill pipe, 2nd plug:
360' w/40 sxs, 3rd plug: 40' w/10 sxs, Rathole w/15 sxs, Mousehole w/10 sxs.
(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:
Douglas H. McGinness PHONE# (316) _267-6065
ADDRESS 150 N. Main, Suite 1026 City/State Wichita, Kansas 67202
PLUGGING CONTRACTOR Duke Drilling Company (company name) KCC LICENSE # 5929 (contractor's)
ADDRESS 310 W. Central, Suite 202 PHONE# (316)
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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: 6/17/97 AUTHORIZED OPERATOR/AGENT: (signature)
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