

STATE OF KANSAS
STATE CORPORATION COMMISSION
CONSERVATION DIVISION
130 S. Market, Room 2078
Wichita, Kansas 67202

FORM CP-1
Rev. 03/92

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

API #: 15-113-19210-00-01 (Identifier number of this well). This must be listed for wells drilled since 1967; if no API# was issued,

indicate spud or completion date OWWO in 10/19/82, originally drilled 7/10/59

WELL OPERATOR: American Energies Corporation
(owner/company name)

KCC LICENSE # 5399
(operator's)

ADDRESS: 155 North Market

CITY: Wichita

STATE: Kansas ZIP CODE 67202

CONTACT PHONE: 316-263-5785

LEASE: Bitikofor

WELL#: 2

Section 1

Township 20 Range 1W

COUNTY: McPherson

SPOT LOCATION
NW 1/4 SE-NW
4680' 3688' FEET (in exact footage) FROM North LINE OF SECTION (NOT Lease Line)
1980' 3405' FEET (in exact footage) FROM West LINE OF SECTION (NOT Lease Line)

Check One: Oil Well Gas Well X D&A SWD/ENHR WELL

SWD Docket # _____

CONDUCTOR CASING SIZE None SET AT _____ CEMENTED WITH _____ SACKS

SURFACE CASING SIZE 8 5/8" SET AT 219' CEMENTED WITH Not available SACKS

PRODUCTION CASING SIZE 5 1/2" SET AT 3108' CEMENTED WITH 125 SACKS

LIST (ALL) PERFORATIONS AND BRIDGEPLUG SETS:

Perforated @ 2914-22

ELEVATION _____ G.L. _____ 1566 K.B. T.D. 2926 P.B.T.D. _____ Anhydrite Depth _____

(Stone Corral Formation)

CONDITION OF WELL: GOOD X POOR CASING LEAK _____ JUNK IN HOLE _____

PROPOSED METHOD OF PLUGGING:

Place 50' sand plug over perms. Fill hole with mud and set a 35 sx plug @ 440' and fill to surface with cement (estimated 35 sx).

We will attempt to pull casing.

IS WELL LOG ATTACHED TO THIS APPLICATION AS REQUIRED? No (YES,NO) IS ACO-1 FILED? Yes (YES,NO)
If not explain why? No logs run

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:

Name: Doug Ward

Phone#: (620)628-4424

Address: P.O. Box 516, 136 N. Main

City: Canton

State: Kansas

PLUGGING CONTRACTOR: American Energies Corporation

KCC LICENSE #: 5399

(company name)

(contractor's)

Address: P.O. Box 516, 136 N. Main

City: Canton

State: Kansas

Zip 67428

PROPOSED DATE AND HOUR OF PLUGGING (If Known?) _____

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

Operator X Agent _____

DATE: 12/20/05 AUTHORIZED OPERATOR OR AGENT: _____

Alan L. DeGood
(signature) Alan L. DeGood, President

RECEIVED
DEC 21 2005
KCC WICHITA