KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

WELL PLUGGING APPLICATION

Please TYPE Form and File ONE Copy

Form CP-1 September 2003 This Form must be Typed Form must be Signed All blanks must be Filled

API # 15 - 125-30832-0000 (Identifier Number of this well). This must be listed for wells drilled since 1967; if no API # was issued, indicate original spud or completion date__ Well Operator: Rockin Bar Nothin Ranch Inc. ____ KCC License #: 33297 (Owner / Company Name) Address: P.O. Box 395 ____ City:_Tyro _{State:}_Kansas Zip Code: 67364 Contact Phone: (620) 289 - 4782 Lease: RBN OWENS LEASE Sec. 11 Twp. 34 S. R. 14 ✓ East West Well #: 2 County:_Montgomery W 1/2 - SE - NE Spot Location / QQQQ 3400 Feet (in exact footage) From North / 🗸 South (from nearest outside section corner) Line of Section (Not Lease Line) 1000 Feet (in exact footage) From

✓ East / West (from nearest outside section corner) Line of Section (Not Lease Line) Gas Well ✓ D&A Cathodic Water Supply Well Oil Well SWD Docket #___ ENHR Docket # Cemented with: Surface Casing Size: ___7 Set at: 21.55 Cemented with: 9 Set at: Cemented with: Production Casing Size: List (ALL) Perforations and Bridgeplug Sets: N?A Elevation: 899' ([G.L./ [K.B.) T.D.: 669" PBTD: ____ Anhydrite Depth: (Stone Corral Formation) Casing Leak Junk in Hole Condition of Well: Good Poor Proposed Method of Plugging (attach a separate page if additional space is needed): 5 5/8 open hole - 50' concrete at TD, gelspacer, 50' concrete at 400', gel spacer, and concrete from 250' to surface. Is Well Log attached to this application as required? Yes V No Is ACO-1 filed? Yes V No If not explain why? No log, dry hole. ACO-1 in process now. RECEIVED 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: ______ Phone: (620) 431 - 9219 Tony Carpenter c/o Consolidated Oil Well Services _____ City / State: Bartlesville, OK 74005 Address: P.O. Box 1453 Plugging Contractor: Consolidated Oil Well Services ____ KCC License #: 31440 (Contractor's) (Company Name) Address: P.O. Box 1453 ____ Phone: (620) 431 Bartlesville, OK 74005 Proposed Date and Hour of Plugging (if known?): 10/21/2005 at 9:00 a.m. Payment of the Plugging Fee (K.A.R. 82-3-118) will be guaranteed by Operator or Agent, Date: 10/21/2005 ___ Authorized Operator / Agent:_

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

