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

FORM CP-1 (3/92)

RECEIVED
STATE CORPORATION COMMISSION

OCT 2 5 2000

CONSERVATION DIVISION
Wichita, Kansas

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

API # 15-033-20698 .00-00 (Identifier number of this well). This must be listed for all wells drilled since 1967; if no API# was issued, indicate spud or completion date. 8/01

WELL OPERATOR ONEOK Resources Company KCC LICENSE # 4548
(owner/company name)   (operator's)

ADDRESS P. O. Box 871   CITY Tulsa

STATE OK   ZIP CODE 74102-0871 CONTACT PHONE # (918) 588-7711

LEASE Ferrin   WELL# 1A   SEC. 15 T. 31S R. 17 (East/West)

____ - SE - NW - SW SPOT LOCATION/QQQQ   COUNTY Comanche

2310 FEET (in exact footage) FROM S/N (circle one) LINE OF SECTION (NOT Lease Line)

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

Check One: OIL WELL ___ GAS WELL X D&A ___ SWD/ENHR WELL ___ DOCKET#_____

CONDUCTOR CASING SIZE _____ SET AT _____ CEMENTED WITH _____ SACKS

SURFACE CASING SIZE 10-3/4 SET AT 614 CEMENTED WITH 500 SACKS

PRODUCTION CASING SIZE 4-1/2 SET AT 5144 CEMENTED WITH 200 SACKS

LIST(ALL) PERFORATIONS and BRIDGEPLUG SETS: _____

ELEVATION 2093 / 2102 T.D. 5145 PBTD _____ ANHYDRITE DEPTH 900 est
(G.L./K.B.)   (Stone Corral Formation)

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

PROPOSED METHOD OF PLUGGING As per KCC requirements

_____

(If additional space is needed attach separate page)

IS WELL LOG ATTACHED TO THIS APPLICATION AS REQUIRED? Yes IS ACO-1 FILED? Copy Attch

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:

Dennis Hertel   PHONE# (316) 672-9388

ADDRESS 4033 N. Highway 281   City/State Pratt, Kansas 67124

PLUGGING CONTRACTOR Clarke Corporation   KCC LICENSE # 5105
(company name)   (contractor's)

ADDRESS Medicine Lodge, KS. 67104 PHONE # ( ) _____

PROPOSED DATE AND HOUR OF PLUGGING (If Known?) 11-3-00 @ 12:45 pm, plugged

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

DATE: 10/23/00 AUTHORIZED OPERATOR/AGENT: Dayl K. Duvall
(Signature)