RECEIVED 0CT 2 8 2005 KCC WICHITA

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 - 009-22,865 ~ 00-00	_ (Identifier Number of this well).	This must be listed for wells drilled since 196	7; if no API # was issued,
indicate original spud or completion date 11/15/82			1/2
Well Operator: Grady Bolding Corporation		KCC License #: 7383	
Address: P.O. Box 486	ompany Name)	Ellinwood	(Operator's)
		Contact Phone: (620) 564 - 2	2240
Lease: Pfaff		Sec. 33 Twp. 18 19 s. R. 1	
NIM/ NIE NIM/		y: Barton	
Check One: 🗸 Oil Well 📗 Gas Well 📗 I	North / V South (from near	est outside section corner) Line of Section (Not less outside section corner) Line of Section (Not less outside section with the section (Not less outside section (Not less outside section (Not less outside section with section (Not less outside section corner)	.ease Line)
SWD Docket #			
	Set at:		Sacks
Surface Casing Size: 8 5/8"			
Production Casing Size: 5 1/2" List (ALL) Perforations and Bridgeplug Sets: Perforat			Sacks
Elevation: 1786' (Gall / K.B.) T.D.: 3420' Condition of Well: Good Poor Proposed Method of Plugging (attach a separate page if ac Mike's Testing will plug the well and remove	Iditional space is needed):		rmation)
Plugging of this Well will be done in accordance with List Name of Company Representative authorized to be	•	Crady Polding	ation Commission.
Address: P.O. Box 486		City / State: Ellinwood, KS. 67526	a
Plugging Contractor: Mike's Testing and Salvage, Inc		KCC License #: 31529	
Address: P.O. Box 467 Chase, KS 57524	y Name)	Phone: (620) 938 - 2943	actor's)
Proposed Date and Hour of Plugging (if known?): Will	be determined as work p	rogresses	
Payment of the Plugging Fee (K.A.R. 82-3-118) will be Date: 10/27/05 Authorized Operator / Agr	guaranteed by Operato) or A		