

RECEIVED
JUN 15 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 # 15-065-22,342-00-02 (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 12-16-86

Well Operator: John O. Farmer, Inc. KCC License #: 5135
(Owner / Company Name) (Operator's)

Address: P.O. Box 352 City: Russell

State: Kansas Zip Code: 67665 Contact Phone: (785) 483-3144

Lease: Albertson Well #: 2 WSW Sec. 18 Twp. 9 S. R. 23 East West

C SE NW Spot Location / QQQQ County: Graham

1980 Feet (in exact footage) From North / South (from nearest outside section corner) Line of Section (Not Lease Line)

1980 Feet (in exact footage) From East / West (from nearest outside section corner) Line of Section (Not Lease Line)

Check One: Oil Well Gas Well D&A Cathodic Water Supply Well
 SWD Docket # _____ ENHR Docket # _____ Other: _____

Conductor Casing Size: _____ Set at: _____ Cemented with: _____ Sacks

Surface Casing Size: 10-3/4" Set at: 134' Cemented with: 100 Sacks

Production Casing Size: 7" Set at: 1799' Cemented with: 300 Sacks

List (ALL) Perforations and Bridgeplug Sets: 1020-30', 1042-52', cement plug 1290-1340', 1356-66,

bridge plug @ 1403', 1498-1508', 1512-16'

(Estimated) Elevation: 2340' (G.L. / K.B.) T.D.: 1800' P.B.T.D.: 1290' Anhydrite Depth: NA
(Stone Corral Formation)

Condition of Well: Good Poor Casing Leak Junk in Hole

Proposed Method of Plugging (attach a separate page if additional space is needed): As recommended by KDHE

Is Well Log attached to this application as required? Yes No Is ACO-1 filed? Yes No

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: _____

Duane Eichman Phone: (785) 483-8355

Address: 1530 AA Road City / State: Plainville, KS 67663

Plugging Contractor: Allied Cementing Company, Inc. KCC License #: 99996
(Company Name) (Contractor's)

Address: P.O. Box 31, Russell, KS 67665 Phone: (785) 483-2627

Proposed Date and Hour of Plugging (if known?): June 27, 2005 - 10:00 A.M.

Payment of the Plugging Fee (K.A.R. 82-3-118) will be guaranteed by Operator or Agent

Date: 6-13-05 Authorized Operator / Agent: John O. Farmer III
(Signature)

John O. Farmer III President
Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

le/ok

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SIDE ONE

COPY

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
RECOMPLETION FORM
ACO-2 AMENDMENT TO WELL HISTORY

API NO. 15- 065-22,342

County Graham

C SE NW Sec. 18 Twp. 9S Rge. 23 East West X

3300 Ft. North from Southeast Corner of Section

3300 Ft. West from Southeast Corner of Section

(NOTE: Locate well in section plat below.)

Lease Name Albertson Water Well # 2

Field Name Ernst Northwest

Producing Formation Dakota

(Estimated)

Elevation: Ground 2335' KB 2340'

Operator: License # 5135

Name: John O. Farmer, Inc.

Address: P.O. Box 352

City/State/Zip: Russell, KS 67665

Purchaser:

Operator Contact Person: Marge Schulte
Phone: (913) 483-3144

Designate Type of Original Completion
 New Well Re-Entry Workover

Date of Original Completion 12-18-86

Name of Original Operator John O. Farmer, Inc.

Original Well Name Albertson #2 Water Well

Date of Recompletion:

6-29-90 7-5-90

Commenced Completed

Re-entry Workover

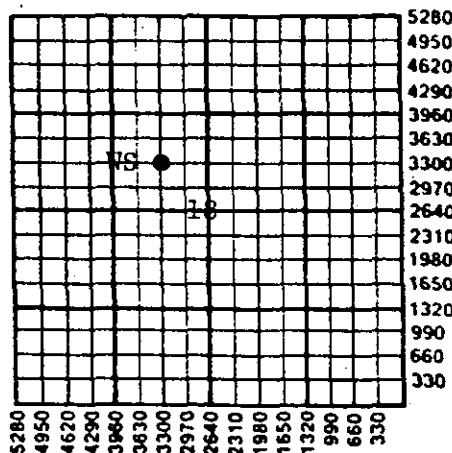
Designate Type of Recompletion/Workover:

Oil SWD Temp. Abd.
 Gas Inj Delayed Comp.
 Dry Other (Core, Water Supply, etc.)

Deepening Re-perforation
 Plug Back PBD
 Conversion to Injection/Disposal

Is recompleted production:

Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (Disposal or Injection?) Docket No. _____



K.C.C. OFFICE USE ONLY

F Letter of Confidentiality Attached
C Wireline Log Received
C Drillers Timelog Received

Distribution

KCC SWD/Rep NGPA
 KGS Plug Other (Specify)

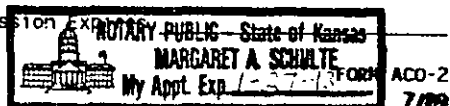
INSTRUCTIONS: This form shall be completed in triplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 120 days of the recompletion of any well. Rules 82-3-107 and 82-3-141 apply. Information on side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form. See rule 82-3-107 for confidentiality in excess of 12 months. One copy of any additional wireline logs and driller's time logs (not previously submitted) shall be attached with this form. Submit ACO-4 or ACO-5 prior to or with this form for approval of commingling or dual completions. Submit CP-1 with all plugged wells. Submit CP-111 with all temporarily abandoned wells. NOTE: Conversion of wells to either disposal or injection must receive approval before use; submit form U-1.

All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Signature John O. Farmer III Title President Date 7-11-90

Subscribed and sworn to before me this 11th day of July 19 90

Notary Public Margaret A. Schulte Date Commission Expires 1-3-98



SIDE TWO

Operator Name John O. Farmer, Inc. Lease Name Albertson Water Well # 2
 Sec. 18 Twp. 9S Rge. 23 East West County Graham

RECOMPLETION FORMATION DESCRIPTION

Log Sample

Name	Top	Bottom
Dakota	1020'	1052'

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose: <input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	Depth		Type of Cement	# Sacks Used	Type and Percent Additives
	Top	Bottom			

Shots Per Foot	PERFORATION RECORD Specify Footage of Each Interval Perforated		Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)
2	1020-30'	& 1042-52'	N/A

PBTD 1290' Plug Type cement plug from 1290-1340'

TUBING RECORD

Size 2-7/8" Set At 930' Packer At N/A Was Liner Run Y X N

Date of Resumed Production, Disposal or Injection July 5, 1990

Estimated Production Per 24 Hours Oil _____ Bbls. Water _____ Bbls. Gas-Oil-Ratio _____

Water Source Well _____ Gas _____ Mcf

Disposition of Gas:

Vented Sold Used on Lease (If vented, submit ACO-18.)

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
RECOMPLETION FORM
AOC-2 AMENDMENT TO WELL HISTORY

Copy

API NO. 15- 065-22,342

County Graham

C SE NW Sec 18 Twp 9S Rge 23 X East West

3300 Ft North from Southeast Corner of Section
3300 Ft West from Southeast Corner of Section

(Note: Locate well in section plat below)

Water

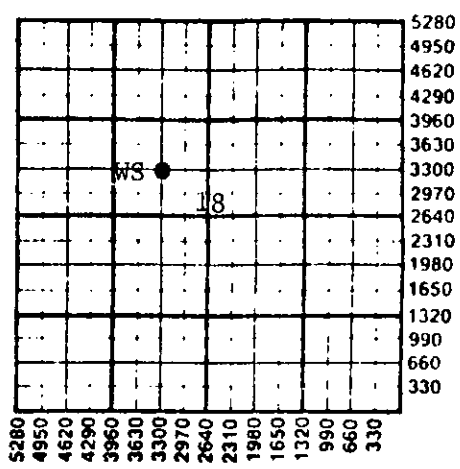
Lease Name Albertson Well # 2

Field Name Ernst Northwest

Name of New Formation Cheyenne
(Estimated)

Elevation: Ground 2335' KB 2340'

Section Plat



Operator: License # 5135
Name John O. Farmer, Inc.
Address P.O. Box 352
Russell, KS 67665
City/State/Zip _____

Purchaser _____

Operator Contact Person Marge Schulte
Phone (913) 483-3144

Designate Type of Original Completion
 New Well Re-Entry Workover

 Oil SWD Temp Abd
 Gas Inj Delayed Comp.
 Dry Other (Core, Water Supply etc.)

Date of Original Completion: 12-18-86

DATE OF RECOMPLETION:
4-5-89 4-10-89
Commenced' Completed

Designate Type of Recompletion/Workover:
 Deepening Delayed Completion
 Plug Back Re-perforation
 Conversion to Injection/Disposal

Is recompleted production:
 Commingled; Docket No. _____
 Dual Completion; Docket No. _____
 Other (Disposal or Injection)?

K. C. C. OFFICE USE ONLY

Letter of Confidentiality Attached
 Wireline Log Received
 Drillers Timelog Received

Distribution

KCC SWD/Rep NGPA
 KGS Plug Other
(Specify)

.....
.....

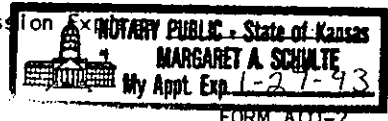
INSTRUCTIONS: This form shall be completed in triplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 120 days of the recompletion of any well. Rules 82-3-107 and 82-3-141 apply. Information on side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form. See rule 82-3-107 for confidentiality in excess of 12 months. One copy of any additional wireline logs and driller's time logs (not previously submitted) shall be attached with this form. Submit AOC-4 prior to or with this form for approval of commingling or dual completions. Submit CP-4 with all plugged wells. Submit CP-111 with all temporarily abandoned wells. NOTE: Conversion of wells to either disposal or injection must receive approval before use; submit form U-1.

All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Signature John O. Farmer III Title Vice-president Date April 11, 1989

Subscribed and sworn to before me this 11th day of April, 19 89

Notary Public Margaret A. Schulte Date Commission _____



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SIDE TWO

Operator Name John O. Farmer, Inc. Lease Name Albertson Water Well # 2

Sec 18 Twp 9S Rge 23 East West County Graham

RECOMPLETED FORMATION DESCRIPTION:

Log Sample

Name	Top	Bottom
Cheyenne	1356'	1366'

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose:	Depth		Type of Cement	# Sacks Used	Type & Percent Additives
	Top	Bottom			
<input type="checkbox"/> Perforate					
<input type="checkbox"/> Protect Casing					
<input type="checkbox"/> Plug Back TD					
<input type="checkbox"/> Plug Off Zone					

Shots Per Foot	PERFORATION RECORD	Acid, Fracture, Shot, Cement Squeeze Record
	Specify Footage of Each Interval Perforated	(Amount and Kind of Material Used)
4	1356-66'	None

PBTD 1403' Plug Type cast iron bridge plug

TUBING RECORD:

Size 2-7/8" Set At 1085' Packer At _____ Was Liner Run? Y X N

Date of Resumed Production, Disposal or Injection April 10, 1989

Estimated Production Per 24 Hours _____ bbl/oil _____ bbl/water
 _____ MCF gas _____ gas-oil ratio

This is a water source well for the Albertson-Klenk Waterflood. This rework was reviewed and approved by the KCC District Office in Hays, Kansas.

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION OR RECOMPLETION FORM
ACO-1 WELL HISTORY
DESCRIPTION OF WELL AND LEASE

API NO. 15-065-22,342
County Graham
C SE NW 18 9S 23 East
Sec. Twp. Rge. X West

COPY

Operator: License # 5135
Name John O. Farmer, Inc.
Address P.O. Box 352
Russell, KS 67665
City/State/Zip

3300 Ft North from Southeast Corner of Section
3300 Ft West from Southeast Corner of Section
(Note: Locate well in section plat below)

Purchaser

Lease Name Albertson Water Well # 2

Operator Contact Person Margaret A. Schulte
Phone (913) 483-3144

Field Name Ernst Northwest

Producing Formation
(Estimated)
Elevation: Ground 2335' KB 2340'

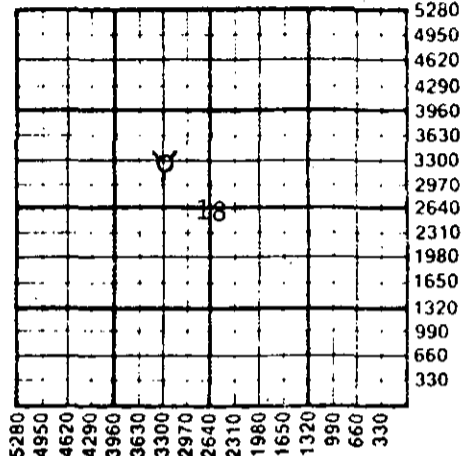
Contractor: License # 5135
Name John O. Farmer, Inc.

Wellsite Geologist
Phone

Designate Type of Completion
X New Well Re-Entry Workover
Oil SWD Temp Abd
Gas Inj Delayed Comp.
Dry X Other (Core, Water Supply etc.)

If OWNO: old well info as follows:
Operator
Well Name
Comp. Date Old Total Depth

Section Plat



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WATER SUPPLY INFORMATION

Disposition of Produced Water: Disposal
Docket # Repressuring

Questions on this portion of the ACO-1 call:

Water Resources Board (913) 296-3717
Source of Water:
Division of Water Resources Permit #
X Groundwater 1320 Ft North from Southeast Corner
(Well) 3300 Ft West from Southeast Corner of
Sec 18 Twp 9S Rge 23 East X West
Surface Water Ft North from Southeast Corner
(Stream, pond etc) Ft West from Southeast Corner
Sec Twp Rge East West
Other (explain)
(purchased from city, R.W.D. #)

WELL HISTORY

Drilling Method:
X Mud Rotary Air Rotary Cable
12-16-86 12-18-86 12-18-86
Spud Date Date Reached TD Completion Date
1800' PBT
Amount of Surface Pipe Set and Cemented at 134 feet
Multiple Stage Cementing Collar Used? Yes X No
If yes, show depth set feet
If alternate 2 completion, cement circulated
from 134 feet depth to surface 100 SX cmt
Cement Company Name Allied Cementing Co., Inc.
Invoice # 47828

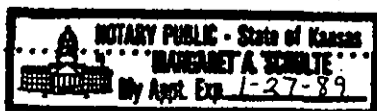
INSTRUCTIONS: This form shall be completed in triplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 120 days of the spud date of any well. Rule 82-3-130, 82-3-107 and 82-3-106 apply.
Information on side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form. See rule 82-3-107 for confidentiality in excess of 12 months.
One copy of all wireline logs and drillers time log shall be attached with this form. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Signature John O. Farmer III
John O. Farmer III
Title Vice-president Date 3-20-87

Subscribed and sworn to before me this 20th day of March 1987
Notary Public Margaret A. Schulte

Date Commission Expires



K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
C Drillers Timelog Received
Distribution
KCC SWD/Rep NGPA
KGS Plug Other
(Specify)

Operator Name John W. Farmer, Inc. Lease Name..... Albertson Well #..... 2.....

Sec..... 18 Twp..... 9S Rge..... 23 East West County..... Graham

WELL LOG

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface during test. Attach extra sheet if more space is needed. Attach copy of log.

Drill Stem Tests Taken Yes No
 Samples Sent to Geological Survey Yes No
 Cores Taken Yes No

Formation Description
 Log Sample

	0	425
Shale		
Shale & Sand	425	1540
Sand	1540	1742
Red Bed	1742	1800

Name Top Bottom

CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs/Ft.	Setting Depth	Type of Cement	#Sacks Used	Type and Percent Additives
Surface	12-1/4"	10-3/4"		134'	60-#0 Poz	100	2% gel
Production	7-7/8"	7"		1799'	Ultralight	200	
					60-#0 Poz	100	

PERFORATION RECORD		Acid, Fracture, Shot, Cement Squeeze Record	
Shots Per Foot	Specify Footage of Each Interval Perforated	(Amount and Kind of Material Used)	Depth
4 SPF	1498-1508' and 1512-16'	NONE	

TUBING RECORD		Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Size	Set At	Packer at	
2-7/8"	1409'		

Date of First Production	Producing Method				
	<input type="checkbox"/> Flowing	<input checked="" type="checkbox"/> Pumping	<input type="checkbox"/> Gas Lift	<input type="checkbox"/> Other (explain).....	
Estimated Production Per 24 Hours	Oil	Gas	Water	Gas-Oil Ratio	Gravity
	-- Bbls	-- MCF	400 Bbls	CFPB	

METHOD OF COMPLETION

Production Interval

Disposition of gas: Vented Open Hole Perforation
 Sold Other (Specify) 1498-1508'
 Used on Lease Dually Completed 1512-1516'
 Commingled

KANSAS

CORPORATION COMMISSION

Kathleen Sebelius, Governor Brian J. Moline, Chair Robert E. Krehbiel, Commissioner Michael C. Moffet, Commissioner

NOTICE OF RECEIPT OF WELL PLUGGING APPLICATION (CP-1)

Farmer, John O., Inc.
370 W Wichita Ave
PO Box 352
Russell, KS 67665-2635

June 16, 2005

Re: ALBERTSON #2 WSW
API 15-065-22342-00-00
SENW 18-9S-23W, 3300 FSL 3300 FEL
GRAHAM COUNTY, KANSAS

Dear Operator:

This letter is to notify you that the Conservation Division is in receipt of your plugging proposal, form CP-1, for the above-captioned well.

Your CP-1 has been reviewed by the Conservation Division central office for completeness and to verify license numbers. The plugging proposal will now be forwarded to the district office listed below for review of your proposed method of plugging.

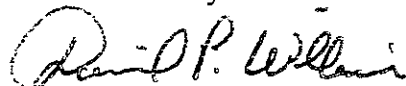
Please contact the district office for approval of your proposed plugging method at least five (5) days before plugging the well, pursuant to K.A.R. 82-3-113 (b). If a workover pit will be used during the plugging of the well it must be permitted. A CDP-1 form must be filed and approved prior to the use of the pit.

The Conservation Division's review of form CP-1, either in the central or district office, does not include an inquiry into well ownership or the filing operator's legal right to plug the well.

This notice in no way constitutes authorization to plug the above-captioned well by persons not having legal rights of ownership or interest in the well. This notice is void after ninety (90) days from the above date.

District: #4
2301 E. 13th
Hays, KS 67601
(785) 625-0550

Sincerely



David P. Williams
Production Supervisor