Rev. 6-3-74 FORM CP-1

STATE OF KANSAS STATE CORPORATION COMMISSION CONSERVATION DIVISION P. O. BOX 17027 WICHITA, KANSAS 67217

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TYED OH OULMISSION

WELL PLUGGING APPLICATION FORM File One Copy

APR 121976

CCRETE MATION DIVISION Wichita, Kansas

API Number 15 - 033-20152-00.00	of this well)		
Lease Owner Clarke Corporation			·
Address 107 West Fowler, Medicine Lod		•	
Lease (Farm Name) Brass		Well No	_1
Well Location <u>C/SENE</u> Sec.		· · · · · · · · · · · · · · · · · · ·	
County Comanche Total	Depth <u>4769</u>	Field Name	·
Oil Well Gas Well X Input Well	SWD Well	Rotary D & A	
Well Log attached with this application as	required Y	'es	
Date and hour plugging is desired to begin	April 19,	1976	
REGULATIONS OF THE STATE CORPORATION COMMI Name of company representative authorized	· .	of plugging opera	tions:
Elmo R. Morgenstern	Address <u>Me</u>	dicine Lodge, Ka	nsas 67104
Plugging Contractor Clarke Corpora	tion	License No.	583
Address 107 West Fowler, Medicine Lo			•
Invoice covering assessment for plugging t		•	
Name Clarke Corporation			•
Address 107 West Fowler, Medicine Lodge	•	04	
Address 107 West Fowler, Medicine Lodg	e, Kansas 671		

Signed:

Applicant or Acting Agent

Date: 16-10-1976



State Corporation Commission

CONSERVATION DIVISION

(Oil, Gas and Water) 245 North Water WICHITA, KANSAS 67202

April 12, 1976

WELL PLUGGING AUTHORITY

Well No.

Lease

Brass

Description

C SE NE Sec. 13-33-16W

County

Comanche

Total Depth

Plugging Contractor Clarke Corporation

Clarke Corporation 107 West Fowler Medicine Lodge, KS 67104

Gentlemen:

This is your authority to plug the above subject well in accordance with the Rules and Regulations of the State Corporation Commission.

This authority is void after 90 days from the above date.

Yours very truly,

Mr. G. Russell Biberstein, Attica, KS is hereby assigned to supervise the plugging of the above named well.