

STATE OF KANSAS
STATE CORPORATION COMMISSION
CONSERVATION DIVISION
245 North Water
WICHITA, KANSAS 67202

Rev. 6-3-74
FORM CP-1

WELL PLUGGING APPLICATION FORM
File One Copy

API Number 15 - 009 - 22,388 0000 (of this well)
Lease Owner Raymond Oil Co. Inc.
Address One Main Place, Suite 900, Wichita, Ks. 67202
Lease (Farm Name) NEELAND "A" Well No. 1
Well Location NE NE NW Sec. 8 Twp. 19S Rge. 12 ~~(E)~~ (W) West
County Barton Total Depth 3350' Field Name _____
Oil Well _____ Gas Well _____ Input Well _____ SWD Well _____ Rotary D & A x
Well Log attached with this application as required Yes
Date and hour plugging is desired to begin 2:30 PM June 6, 1981

PLUGGING OF THIS WELL WILL BE DONE IN ACCORDANCE WITH K.S.A. 55-128 OF THE RULES AND REGULATIONS OF THE STATE CORPORATION COMMISSION.

Name of company representative authorized to be in charge of plugging operations:
Darrel Anderson Address Box 823-Great Bend, Ks. 67530

Plugging Contractor Duke Drilling Co., Inc. License No. _____
Address Box 823-Great Bend, Ks. 67530

Invoice covering assessment for plugging this well should be sent to:
Name RAYMOND OIL CO., INC.
Address One Main Place, Suite 900, Wichita, Ks. 67202

and payment will be guaranteed by applicant or acting agent.

Signed: Darrel Anderson
Applicant or Acting Agent

Date: 6-6-81

RECEIVED
STATE CORPORATION COMMISSION
JUN 10 1981
CONSERVATION DIVISION
Wichita, Kansas

STATE OF KANSAS

STATE CORPORATION COMMISSION
CONSERVATION DIVISION
200 Colorado, Derby Bldg.
Wichita, Kansas 67202

INVOICE and WELL PLUGGING AUTHORITY

July 27, 1981

6015-W

INVOICE NUMBER: _____

TO: _____
Raymond Oil Company
One Main Place
Ste. 900
Wichita, KS., 67202

PLUGGING ASSESSMENT AS FOLLOWS:

Neeland "A" #1
NE NE NW, Sec. 8-19W-12W
Barton \$108.00
Duke Drilling Co., Inc. & Allied Cementing Co.
T.D. 3350'

NOTE: We also need the following before our file is completed:

- _____ Well Plugging Record (CP-4)
- _____ Well Log
- _____ Well Plugging Application (CP-1)

WELL PLUGGING AUTHORITY

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 ninety (90) days from the above date.

PAYABLE UPON RECEIPT

For Administrator



Mr. Gilbert Toman, P.O. Box 180, Holyrood, KS., 67450
is hereby assigned to supervise the plugging of the above mentioned well.