

STATE OF KANSAS
STATE CORPORATION COMMISSION
CONSERVATION DIVISION
200 Colorado Derby Building
Wichita, Kansas 67202

FORM CP-1
Rev. 6/4/84

WELL PLUGGING APPLICATION FORM
(File One Copy)

API NUMBER 15-151-21,058⁰⁰⁻⁰⁰ (of this well)

(This must be listed; if no API# was issued, please note drilling completion date.)

LEASE OPERATOR Rival Resources Inc OPERATORS LICENSE NO. 8483

ADDRESS 2727 Bryant St #430 Denver CO 80211 PHONE # (303) 458-8584

LEASE (FARM) COUNTY FARM WELL NO. 1 WELL LOCATION NW-NW-NE 15-28S-13E COUNTY Pott

SEC. 15 TWP. 28S RGE. 13E (S) or (W) (W) TOTAL DEPTH 4605 PLUG BACK TD _____

Check One:

OIL WELL _____ GAS WELL _____ D & A SWD or INJ WELL _____ DOCKET NO. _____

SURFACE CASING SIZE 8 5/8 SET AT 368 CEMENTED WITH 225 SACKS

CASING SIZE 4 1/2 SET AT 4507 CEMENTED WITH _____ SACKS

PERFORATED AT 3911' 3- Holes

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

OPERATOR'S SUGGESTED METHOD OF PLUGGING THIS WELL Bridge Plug @ 3860

Pump Cement Down 8 5/8

(If additional space is needed use back of form)

IS WELL LOG ATTACHED TO THIS APPLICATION AS REQUIRED? _____ IS ACO-1 FILED? yes
(If not, explain)

DATE AND HOUR PLUGGING IS DESIRED TO BEGIN 1-12-85 8:00 AM

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.

RECEIVED
STATE CORPORATION COMMISSION

NAME OF COMPANY REPRESENTATIVE AUTHORIZED TO BE IN CHARGE OF PLUGGING OPERATIONS:

Rival Resources, Inc. PHONE # (303) 458-8584

ADDRESS 2727 Bryant St., Suite 430

PLUGGING CONTRACTOR Bayse Well Service LICENSE NO. _____

ADDRESS P. O. Box 149, Stafford, KS 67578 PHONE # (316) 234-5235

PAYMENT WILL BE GUARANTEED BY OPERATOR OR AGENT SIGNED: Joyce E. Myles
(Operator or Agent)

DATE: February 14, 1985