

STATE OF KANSAS
STATE CORPORATION COMMISSION
CONSERVATION DIVISION
130 South Market, Room 2078
Wichita, Kansas 67202-3802

FORM CP-1
Rev. 03/92

WELL PLUGGING APPLICATION FORM
(PLEASE TYPE FORM and File ONE Copy)

API # 15-095-21739 0000 (Identifier number of this well). This must be listed for wells drilled since 1967; if no API# was issued, indicate spud or completion date.

WELL OPERATOR Bison Production Company KCC LICENSE # 31532
(owner/company name) (operator's)

ADDRESS 9320 E. Central CITY Wichita

STATE Kansas ZIP CODE 67206 CONTACT PHONE # (316) 636-1801

LEASE Weve WELL # 1-28 SEC. 28 T. 29 R. 7 ~~XXXX~~ (East/West)

N/2- NE - NW - SPOT LOCATION/OOOO COUNTY Kingman County, Kansas

330 FEET (in exact footage) FROM S/W (circle one) LINE OF SECTION (NOT Lease Line)

1960 FEET (in exact footage) FROM E/W (circle one) LINE OF SECTION (NOT Lease Line)

Check One: OIL WELL GAS WELL D&A SWD/ENHR WELL DOCKET# _____

CONDUCTOR CASING SIZE _____ SET AT _____ CEMENTED WITH _____ SACKS

SURFACE CASING SIZE 8-5/8" SET AT 215' CEMENTED WITH 165 SACKS

PRODUCTION CASING SIZE _____ SET AT _____ CEMENTED WITH _____ SACKS

LIST (ALL) PERFORATIONS and BRIDGEPLUG SETS: _____

ELEVATION 1565/1573' T.D. 4199' PBTD 4200' ANHYDRITE DEPTH _____
(G.L./K.B.) (Stone Corral Formation)

CONDITION OF WELL: GOOD POOR CASING LEAK JUNK IN HOLE

PROPOSED METHOD OF PLUGGING _____

(If additional space is needed attach separate page)

IS WELL LOG ATTACHED TO THIS APPLICATION AS REQUIRED? no IS ACO-1 FILED? yes

If not explain why? logs were not run.

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:

Bison Production Company PHONE# (316) 636-1801

ADDRESS 9320 E. Central City/State Wichita, KS 67206

PLUGGING CONTRACTOR Duke Drilling Co., KS KCC LICENSE # 5929
(company name) (contractor's)

ADDRESS 310 W. Central, Suite 202 PHONE# (316) 267-1331

PROPOSED DATE AND HOUR OF PLUGGING (If Known?) 7:30 AM 12-16-97

PAYMENT OF THE PLUGGING FEE (K.A.R. 82-3-118) WILL BE GUARANTEED BY OPERATOR OR AGENT

DATE 3-2-98 AUTHORIZED OPERATOR/AGENT: _____
(signature)

MAR 4 1998
3-4-98

RECEIVED
MAR 4 1998