

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 # 15-173-20890 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 Oil Producers Inc. of Kansas KCC LICENSE # 8061
(owner/company name) (operator's)

ADDRESS P.O. Box 8641 CITY Wichita

STATE Kansas ZIP CODE 67208 CONTACT PHONE # (316) 681-0231

LEASE Andra WELL # 1 SEC. 18 T. 28S R. 1 (~~East~~/West)

C-SW-SW SPOT LOCATION/OOOO COUNTY: Sedgwick County, Kansas

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

4760 FEET (in exact footage) FROM S/N (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 13-3/8" SET AT 215' CEMENTED WITH 240 SACKS

PRODUCTION CASING SIZE _____ SET AT _____ CEMENTED WITH _____ SACKS

LIST (ALL) PERFORATIONS and BRIDGEPLUG SETS: _____

ELEVATION 1340/ T.D. 3480' PBDT 3500' ANHYDRITE DEPTH _____
(G.L./K.B.) (Stone Corral Formation)

CONDITION OF WELL: GOOD POOR CASING LEAK JUNK IN HOLE

PROPOSED METHOD OF PLUGGING per KCC recommendations

RECEIVED
KANSAS CORPORATION COMMISSION

JUN 14 1996
6-14-1996

(If additional space is needed attach separate page)

CONSERVATION DIVISION
WICHITA, KS

IS WELL LOG ATTACHED TO THIS APPLICATION AS REQUIRED? _____ IS ACO-1 FILED? _____

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:

Brad Siroky PHONE# (316) 672-6373

ADDRESS 10264 Country Club Rd City/State Pratt Ks. 67124

PLUGGING CONTRACTOR Halliburton KCC LICENSE # _____
(company name) (contractor's)

ADDRESS Great Bend, Ks. PHONE# () _____

PROPOSED DATE AND HOUR OF PLUGGING (If Known?) 8:00 PM 05-31-96

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

DATE: 6/13/96 AUTHORIZED OPERATOR/AGENT: John S. Weir
John S. Weir (signature)