

**WELL PLUGGING APPLICATION FORM**  
FILE ONE COPY

API NUMBER 6-1-85 (OF THIS WELL)  
(THIS MUST BE LISTED, IF NO API# AVAILABLE PLEASE NOTE DRILLING COMPLETION DATE.)

LEASE OWNER CASE OIL & GAS

ADDRESS P.O. BOX 8564, 110 SOUTH MAIN, PRATT, KANSAS 67124

LEASE (FARM NAME) NOVEMBER WELL NO. #1

WELL LOCATION N/2 NE NW SEC. 35 TWP. 27S RGE. 16W (EAST) (WEST)

COUNTY KIOWA TOTAL DEPTH \_\_\_\_\_ FIELD NAME \_\_\_\_\_

OIL WELL \_\_\_\_\_ GAS WELL \_\_\_\_\_ INPUT WELL \_\_\_\_\_ STD WELL \_\_\_\_\_ D&A \_\_\_\_\_ DRY HOLE \_\_\_\_\_

WELL LOG ATTACHED WITH THIS APPLICATION AS REQUIRED? LOG IS ATTACHED  
(IF NOT STATE REASON WHY)

DATE AND HOUR PLUGGING IS DESIRED TO BEGIN 2:30 P.M. 6-1-85

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:  
DON GIBBLE ADDRESS \_\_\_\_\_

PLUGGING CONTRACTOR SUN CEMENTING LICENSE NO. \_\_\_\_\_

ADDRESS MEDICINE LODGE, KS.

RECEIVED  
STATE CORPORATION COMMISSION

INVOICE COVERING ASSESSMENT FOR PLUGGING THIS WELL SHOULD BE SENT TO: JUN 12 1985

NAME CASE OIL & GAS CONSERVATION DIVISION  
Wichita, Kansas

ADDRESS P.O. BOX 8564, 110 SOUTH MAIN PRATT, KANSAS 67124

AND PAYMENT WILL BE GUARANTEED BY APPLICANT OF ACTING AGENT.

SIGNED: [Signature]  
APPLICANT  
WAYNE L. KIRKMAN  
PRESIDENT  
6-10-85