

TYPE OR PRINT
NOTICE: Fill out completely
and return to Cons. Div.
office within 30 days.

LEASE OPERATOR Cabot Oil & Gas Corporation

ADDRESS 9400 N. Broadway - Ste 608; Oklahoma City, OK 73114

PHONE# (405) 478-6500 OPERATORS LICENSE NO. 06120

Character of Well D&A

(Oil, Gas, D&A, SWD, Input, Water Supply Well)

The plugging proposal was approved on March 31, 1992 (date)

by David Williams and witnessed by KCC - Glenn Barlow (KCC District Agent's Name).

Is ACO-1 filed? Yes If not, is well log attached? _____

Producing Formation Dry Depth to Top _____ Bottom _____ T.D. _____

Show depth and thickness of all water, oil and gas formations.

OIL, GAS OR WATER RECORDS		CASING RECORD				
Formation	Content	From	To	Size	Put In	Pulled out
2457-2463; 2543-46	Dry	0'	672'	8-5/8"	672'	
2525-37; 2486-2503	Dry	0'	2849'	4-1/2"	2849'	
2574-81; 2587-91	Dry					
2625-31; 2643-46; 2657-61	-- Dry					

Describe in detail the manner in which the well was plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. If cement or other plug were used, state the character of same and depth placed, from _____ feet to _____ feet each set
Set CIBP @ 2400' w/2sx of Cement. Circ 9.0#/gal plug mud. 2nd plug set with 20 sx of 40-60 Poz @ 1713'-1370'. 3rd plug set with 20 sxs of 40-60 Poz @ 712'-370'. Final plug set with 10sxs of 40-60 Poz @ 30'-4'. Cut off 8-5/8" & 4-1/2" csg 4' below GL and welded on plate.

Name of Plugging Contractor Halliburton Services License No. N/A

Address 9400 N. Broadway - Suite 608; Oklahoma City, OK 73114

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Cabot Oil & Gas Corporation

STATE OF Oklahoma COUNTY OF Oklahoma, ss.

Jim R. Pendergrass, Drilling Superintendent for Cabot (Employee of Operator) or (Operator) of above-described well, being first duly sworn on oath, says: That I have knowledge of the facts statements, and matters herein contained and the log of the above-described well as filed the the same are true and correct, so help me God.

(Signature) Jim R. Pendergrass
(Address) 9400 N. Broadway - Suite 608
Oklahoma City, OK 73114

SUBSCRIBED AND SWORN TO before me this 23 day of April, 19 92

Roberta E. Mitchell
Notary Public

My Commission Expires: November 9, 1992
USE ONLY ONE SIDE OF EACH FORM

RECEIVED
STATE CORPORATION COMMISSION
APR 27 1992
CONSERVATION
Form CP-4
Revised 05-88
4-27-1992

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

Rev. 2/89

WELL PLUGGING APPLICATION FORM
(File One Copy)

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

WELL OWNER/OPERATOR _____ **OPERATOR'S LICENSE NO.** _____

ADDRESS _____ **PHONE # ()** _____

LEASE (FARM) _____ **WELL NO.** _____ **WELL LOCATION** _____ **COUNTY** _____

SEC. _____ **TWP.** _____ **RGE.** _____ **(E) or (W)** **TOTAL DEPTH** _____ **PLUG BACK TD** _____

Check One:

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

SURFACE CASING SIZE _____ **SET AT** _____ **CEMENTED WITH** _____ **SACKS**

CASING SIZE _____ **SET AT** _____ **CEMENTED WITH** _____ **SACKS**

PERFORATED AT _____

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

PROPOSED METHOD OF PLUGGING _____

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

DATE AND HOUR PLUGGING IS DESIRED TO BEGIN _____

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.

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

_____ **PHONE # ()** _____

ADDRESS _____

PLUGGING CONTRACTOR _____ **LICENSE NO.** _____

ADDRESS _____ **PHONE # ()** _____

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

USE ONLY ONE SIDE OF EACH FORM

SIGNED: _____
(Operator or Agent)

DATE: _____