STATE OF KANSAS
STATE CORPORATION COMMISSION
CONSERVATION DIVISION
200 DERBY BLDG.
WICHITA, KANSAS 67202

Rev. 12-11-80
FORM CP-1

WELL PLUGGING APPLICATION FORM
FILE ONE COPY

API NUMBER _____ 15-057-20,386 – 0000 _____ (OF THIS WELL)
(THIS MUST BE LISTED, IF NO API# AVAILABLE PLEASE NOTE DRILLING COMPLETION DATE.)

LEASE OWNER ____ DONALD C. SLAWSON _____

ADDRESS _____ 200 Douglas Building   Wichita, Kansas   67202 _____

LEASE (FARM NAME) _____ Linlor 'A' _____ WELL NO. _____ 3 _____

WELL LOCATION _____ C SE NE _____ SEC. 14 TWP. 27S RGE. 22W (EAST) (WEST)

COUNTY _____ Ford _____ TOTAL DEPTH _5185'_ FIELD NAME Konda SE

OIL WELL _____ GAS WELL _____ INPUT WELL _____ SWD WELL _____ D&A _XX_

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

DATE AND HOUR PLUGGING IS DESIRED TO BEGIN _____ August 15, 1984 _____

PLUGGING OF THIS WELL WILL BE DONE IN ACCORDANCE WITH K. S. A. OR 55-128 OF THE RULES AND
REGULATIONS OF THE STATE CORPORATION COMMISSION

RECEIVED
SEP 27 1984 9-27-84
CONSERVATION DIVISION
Wichita, Kansas

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

_____ Bill Rowe _____ ADDRESS _____ Great Bend, Kansas   67530 _____

PLUGGING CONTRACTOR _____ Halliburton Services _____ LICENSE NO. _____

ADDRESS _____ Box 579   Great Bend, Kansas   67530 _____

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

NAME _____ DONALD C. SLAWSON _____

ADDRESS _____ 200 Douglas Building   Wichita, Kansas   67202 _____

AND PAYMENT WILL BE GUARANTEED BY APPLICANT OF ACTING AGENT.

SIGNED: _____ WR Horigan _____
APPLICANT OR ACTING AGENT
WILLIAM R. HORIGAN
DATE: _____ 9-10-84 _____