

WELL PLUGGING APPLICATION FORM
FILE ONE COPY

API NUMBER 9-18-85 (OF THIS WELL)
(THIS MUST BE LISTED, IF NO API# AVAILABLE PLEASE NOTE DRILLING COMPLETION DATE.)

LEASE OWNER RAYMOND OIL CO.

ADDRESS ONE MAIN PLACE-SUITE 900 WICHITA, KS. 67202

LEASE (FARM NAME) HOUSE WELL NO. #1-

WELL LOCATION SE/4 SE/4 SE/4 SEC. 7 TWP. 29SRGE. 15W (EAST) **(WEST)**

COUNTY PRATT TOTAL DEPTH _____ FIELD NAME _____

OIL WELL _____ GAS WELL _____ INPUT WELL _____ SHO 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 4:30 P.M. 9-18-85

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:

STEVE DURANT ADDRESS DODGE CITY, KS. 9-25-85

PLUGGING CONTRACTOR B.J. TITTAN LICENSE NO. _____

ADDRESS MEDICINE LODGE, KS.

RECEIVED
STATE CORPORATION COMMISSION

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

SEP 25 1985

NAME RAYMOND OIL COMPANY

CONSERVATION DIVISION
Wichita, Kansas

ADDRESS SAME AS ABOVE

NO PAYMENT WILL BE GUARANTEED BY APPLICANT OR ACTING AGENT.

WAYNE L. KIRKMAN
PRESIDENT
SEPT. 23, 1985

SIGNED: [Signature]
APPLICANT

DATE: _____