

15095-01608-0000

STATE OF KANSAS
STATE CORPORATION COMMISSION
CONSERVATION DIVISION
500 INSURANCE BUILDING
212 NORTH MARKET
WICHITA, KANSAS 67202

FORM CP-1

WELL PLUGGING APPLICATION FORM
File One Copy

RECEIVED
STATE CORPORATION COMMISSION
SEP 11 1969
CONSERVATION DIVISION
Wichita, Kansas

Lease Owner Specter Pipe & Supply, Inc.

Address Box 169, Russell, Kansas

Lease (Farm Name) McCartney Well No. 4

Well Location CW/2 NE SE Sec. 15 Twp. 27 Rge. 10 (E) (W) X

County Kingman Field Name (If Any) _____

Total Depth 4336 $\frac{1}{2}$ Oil Well X Gas Well _____ Input Well _____ SWD Well _____ D & A _____

Well Log filed with application yes or Well Log filed with Plugging Supervisor _____

Date and hour plugging is desired to begin Immediately

Plugging of the well will be done in accordance with the Rules and Regulations of the State Corporation Commission.

Name of company representative in charge of plugging operations _____

Lynch Casing Pulling Co. Address Box 169, Russell, Kansas

Plugging Contractor Lynch Casing Pulling Co. License No. _____

Address Great Bend, Kansas

Invoice covering assessment for plugging this well should be sent to _____

Specter Pipe & Supply, Inc. Address Box 169, Russell, Kansas

and payment will be guaranteed by applicant.

Signed: [Signature]
Applicant or Acting Agent

Date: Sept. 10, 1969