

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

FORM CP-1
Rev. 6/4/84

WELL PLUGGING APPLICATION FORM
(File One Copy)

API NUMBER 15-083-21,337-0000 (of this well)
(This must be listed; if no API# was issued, please note drilling completion date.)

LEASE OPERATOR D.R. Lauck Oil Company, Inc. OPERATORS LICENSE NO. 5427

ADDRESS 221 S. Broadway, Suite 400, Wichita, KS 67202 PHONE # (316) 263-8267

LEASE (FARM) Mages WELL NO. 1 WELL LOCATION C SW SW COUNTY Hodgeman

SEC. 22 TWP. 24S RGE. 22 (E) or (W) (W) TOTAL DEPTH 4715' PLUG BACK TD none

Check One:

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

SURFACE CASING SIZE 8 5/8 SET AT 411' CEMENTED WITH 225 SACKS

CASING SIZE _____ SET AT _____ CEMENTED WITH _____ SACKS

PERFORATED AT none

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

OPERATOR'S SUGGESTED METHOD OF PLUGGING THIS WELL 50sx @ 1500', 80sx @ 750', 50sx @ 440',
10sx @ 40' w/solid bridge plug, 15sx in rathole

(If additional space is needed use back of form)

IS WELL LOG ATTACHED TO THIS APPLICATION AS REQUIRED? _____ provided by _____
operator IS ACO-1 FILED? Yes
(If not, explain)

DATE AND HOUR PLUGGING IS DESIRED TO BEGIN 3:15 PM 12/15/89

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 COMPANY REPRESENTATIVE AUTHORIZED TO BE IN CHARGE OF PLUGGING OPERATIONS:

Doyle Folkerts

PHONE # (316) 793-5742

ADDRESS P.O. Box 1303, Great Bend, KS 67530

PLUGGING CONTRACTOR Pickrell Drilling Company, Inc.

LICENSE NO. 5123

ADDRESS 110 N. Market, Suite 205, Wichita, KS 67202

PHONE # (316) 262-8427

PAYMENT WILL BE GUARANTEED BY OPERATOR OR AGENT

SIGNED: C.W. Sebits

(Operator or Agent)

C.W. Sebits

DATE: December 19, 1989

RECEIVED
STATE CORPORATION COMMISSION
DEC 21 1989

CONSERVATION DIVISION
Wichita, Kansas

EFFECTIVE DATE: 12-09-89

State of Kansas 083-21,337-0000
NOTICE OF INTENTION TO DRILL

FORM MUST BE SIGNED
ALL BLANKS MUST BE FILLED

Must be approved by the K.C.C. five (5) days prior to commencing well

Expected Spud Date December 6, 1989
month day year

C SW SW Sec 22 Twp 24 S, Rg 22 East
X West

OPERATOR: License # 5427
Name: D. R. Lauck Oil Company, Inc. and Pickrell Drilling Company
Address: 221 S. Broadway, Suite 400
City/State/Zip: Wichita, KS 67202
Contact Person: John D. Knightley
Phone: (316) 263-8267

660 feet from South (line of Section)
4620 feet from East line of Section
(Note: Locate well on Section Plat Below)

CONTRACTOR: License #: 5123
Name: Pickrell Drilling Company

County: Hodgeman
Lease Name: Mages Well #: 1
Field Name: NA

Well Drilled For: Well Class: Type Equipment:
X. Oil ... Inj ... Infield .X. Mud Rotary
... Gas ... Storage ... Pool Ext. ... Air Rotary
... OAWO ... Disposal X. Wildcat ... Cable
... Seismic; ... # of Holes

Is this a Prorated Field? ... yes X.. no
Target Formation(s): Mississippian
Nearest lease or unit boundary: 660 feet
Ground Surface Elevation: 2350 feet MSL
Domestic well within 330 feet: ... yes X.. no
Municipal well within one mile: ... yes X.. no
Depth to bottom of fresh water: 200'
Depth to bottom of usable water: 350'
Surface Pipe by Alternate: X.. 1 .. 2
Length of Surface Pipe Planned to be set: 375'
Length of Conductor pipe required: NONE
Projected Total Depth: 4800'
Formation at Total Depth: Mississippian
Water Source for Drilling Operations:
... well ... farm pond X. other

If OAWO: old well information as follows:
Operator: _____
Well Name: _____
Comp. Date: _____ Old Total Depth _____

Directional, Deviated or Horizontal wellbore? ... yes X.. no
If yes, total depth location: _____

DWR Permit #: _____
Will Cores Be Taken?: ... yes X.. no
If yes, proposed zone: _____

AFFIDAVIT

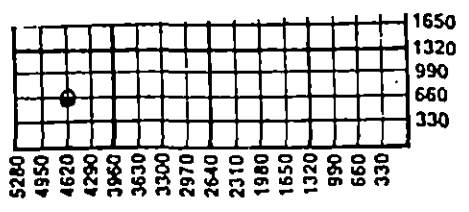
350' Alt. I Req.

Exp. 6/4/90

The undersigned hereby affirms that the drilling is complete

PUSHER Dale Faldy
TD 4715 FORMATION MISS
SURFACE PIPE 4 1/2 @ _____
ANHYDRITE 1470-1502 ELEVATION 12-15-89
STARTING TIME & DATE 12:30 PM
COMPLETION TIME & DATE 3:15 PM
1st PLUG @ 1500 FT. W/ 50 SX
2nd PLUG @ 750 FT. W/ 80 SX
3rd PLUG @ 440 FT. W/ 50 SX
4th PLUG @ 40 FT. W/ 10 SX
RAT HOLE CIRCULATED W/ 15 SX
MOUSE HOLE CIRCULATED W/ _____ SX
WATER WELL PLUGGED W/ _____ SX
CEMENT COMPANY Alied
TECHNICIAN C.M.
TYPE OF CEMENT 60/40 670

Spud 12-7-89
375' w/ 8 3/8"
W.W. = NO



Date: _____ Agent: _____

REMEMBER TO:

- File Drill Pit Application (form CDP-1) with Intent to Drill;
- File Completion Form ACO-1 within 120 days of spud date;
- File acreage attribution plat according to field proration orders;
- Notify appropriate district office 48 hours prior to workover or re-entry;
- Submit plugging report (CP-4) after plugging is completed;
- Obtain written approval before disposing or injecting salt water.