

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

FORM CP-1
Rev. 03/92

WELL PLUGGING APPLICATION FORM
(PLEASE TYPE FORM and File ONE Copy)

API # 15-069-20,256-0000 (Identifier number of this well). This must be listed for wells drilled since 1967; if no API# was issued, indicate spud or completion date.

WELL OPERATOR BRITO OIL COMPANY KCC LICENSE # 4629
(owner/company name) (operator's)

ADDRESS 200 E. First, Ste. 208 CITY Wichita

STATE KS ZIP CODE 67202 CONTACT PHONE # (316) 263-8787

LEASE Wehkamp WELL# #1-15 SEC. 15 T. 24S R. 30 (East/West)

- C - SW - NW SPOT LOCATION/QQQQ. COUNTY Gray

1980' FEET (in exact footage) FROM S/N (circle one) LINE OF SECTION (NOT Lease Line)

660' FEET (in exact footage) FROM E/W (circle one) LINE OF SECTION (NOT Lease Line)

Check One: OIL WELL GAS WELL D&A SWD/ENHR WELL DOCKET# _____

CONDUCTOR CASING SIZE _____ SET AT _____ CEMENTED WITH _____ SACKS

SURFACE CASING SIZE 8 5/8" SET AT 266.95' CEMENTED WITH 60-40 posmix/170 sx SACKS

PRODUCTION CASING SIZE _____ SET AT _____ CEMENTED WITH _____ SACKS

LIST (ALL) PERFORATIONS and BRIDGEPLUG SETS: _____

ELEVATION _____ T.D. 5000' PBDT _____ ANHYDRITE DEPTH _____
(G.L./K.B.) (Stone Corral Formation)

CONDITION OF WELL: GOOD POOR CASING LEAK JUNK IN HOLE

PROPOSED METHOD OF PLUGGING Fill w/heavy mud; set 1st plug @ 2080' w/50 sx; 2nd plug @ 1250' w/80 sx; 3rd plug @ 300' w/50 sx; 4th plug @ 40' w/10 sx; rathole 15 sx; Total 205 sx 60-40 posmix 6% gel 1/4# Floseal per sk.
(If additional space is needed attach separate page)

IS WELL LOG ATTACHED TO THIS APPLICATION AS REQUIRED? IS ACO-1 FILED? No

If not explain why? Sent to Operator to complete.

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.

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

Tony Martin PHONE# (913) 743-5443

ADDRESS 533 N. Main, City/State Wakeeney, KS 67672

PLUGGING CONTRACTOR: Abercrombie RTD, Inc. KCC LICENSE # 30684
(company name) (contractor's)

ADDRESS 150 N. Main, Ste. 801, Wichita, KS 67202 PHONE # (316) 262-1841

PROPOSED DATE AND HOUR OF PLUGGING (If Known?) Complete at 3:45 a.m. 1-5-94

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

DATE: 1-5-94 AUTHORIZED OPERATOR/AGENT: [Signature]
(signature)

RECEIVED
STATE CORPORATION COM

JAN 13 1994

CONSERVATION DIVISION
Wichita, Kansas

API NUMBER _____

LEASE NAME _____

WELL NUMBER _____

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

_____ Ft. from S Section Line

_____ Ft. from E Section Line

SEC. _____ TWP. _____ RGE. _____ (E) or (W)

LEASE OPERATOR _____

COUNTY _____

ADDRESS _____

Date Well Completed _____

PHONE#() _____ OPERATORS LICENSE NO. _____

Plugging Commenced _____

Character of Well _____

Plugging Completed _____

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

The plugging proposal was approved on _____ (date)

by _____ (KCC District Agent's Name).

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

Producing Formation _____ 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

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 section.

Name of Plugging Contractor _____ License No. _____

Address _____

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: _____

STATE OF _____ COUNTY OF _____, ss.

_____, (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 that the same are true and correct, so help me God.

(Signature) _____

(Address) _____

SUBSCRIBED AND SWORN TO before me this _____ day of _____, 19 _____

Notary Public

My Commission Expires: _____
USE ONLY ONE SIDE OF EACH FORM

EFFECTIVE DATE: 12-23-93
DISTRICT # 1
SEA? Yes No

State of Kansas 15. 069-20,256-0008
NOTICE OF INTENTION TO DRILL

FORM MUST BE TYPED
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 Dec. 23 1993
month day year

Spot C SW NW Sec 15 Twp 24 S. Rg 30 East West

OPERATOR: License # 4629
Name: Brito Oil Company, Inc.
Address: 200 E. First, Suite 208
City/State/Zip: Wichita, KS 67202
Contact Person: Raul F. Brito
Phone: 316-263-8787

1980' feet from South / North Line of Section
660' feet from East / West Line of Section
IS SECTION X REGULAR IRREGULAR

CONTRACTOR: License #: 30684
Name: Abercrombie RTD, Inc.

(NOTE: Locate well on the Section Plat on Reverse Side)
County: Gray
Lease Name: Wehkamp Well #: 1-15
Field Name: MH 5X7
Is this a Prorated/Spaced Field? yes no
Target Formation(s): Morrow, Mississippi
Nearest lease or unit boundary: 660'
Ground Surface Elevation: Est. 2840' feet MSL
Water well within one-quarter mile: yes no
Public water supply well within one mile: yes no
Depth to bottom of fresh water: 2335' 240'
Depth to bottom of usable water: 1700' 1250'
Surface Pipe by Alternate: 1 2
Length of Surface Pipe Planned to be set: 260'
Length of Conductor pipe required: None
Projected Total Depth: 5000'
Formation at Total Depth: Mississippi
Water Source for Drilling Operations:
... well ... farm pond other
D&R Permit #:
Will Cores Be Taken?: yes no
If yes, proposed zone:
260' Alt. II Req.

Well Drilled For: Well Class: Type Equipment:
 Oil ... Enh Rec ... Infield Mud Rotary
 Gas ... Storage Pool Ext. ... Air Rotary
 OWWO ... Disposal ... Wildcat ... Cable
 Seismic; ... # of Holes ... Other
 Other

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

Directional, Deviated or Horizontal wellbore? yes no
If yes, true vertical depth:
Bottom Hole Location:

AFFIDAVIT

Exp. 6/17/94

The undersigned hereby affirms that the drilling, completion and eventual plugging of this well will comply with the provisions of the Kansas Corporation Commission Act, S.A. 55-101, et. seq.
It is agreed that the following minimum requirements will be met:

RECEIVED
KANSAS CORPORATION COMMISSION
STATE CORPORATION COMMISSION

JAN 06 1994

Pusher Tony
SPUD DATE 12 20 93 INIT. CR
LENGTH SURFACE PLANNED 260'
RESERVE PIT STATUS- REMOVE FLUID LINED
after salt sect. bbls. when done bbls.
RATHOLED AHEAD? N SIZE HOLE
SURFACE PIPE 8 1/2" @ 2 1/2' CONDUCTOR
ANHYDRITE T-1000 B-2050 ELEVATION
Subsiding - with 5000 4852
TD FORMATION
RAN PIPE @ DV TOOL ALT II DONE
SX SX Y N
Arbuckle Plug @ Ft. W/ SX
Hug./Council @ Ft. W/ SX
Anhydrite Base @ 2080 Ft. W/ 50 SX
1/2 Base Anyh. @ 1250 Ft. W/ 80 SX
1/2, 1/2 Plug @ Ft. W/ SX
Bottom Surface @ 300 Ft. W/ 50 SX
40' Plug @ 40 Ft. W/ 10 SX
RAT HOLE CIRC/W SX MOUSE HOLE W/ SX
WATER WELL SX (Irr. Well Pond Hauling)
TECHNICIAN P.R. DATE 1-5-94
TYPE OF CEMENT 60-40-670 4 1/2
STARTING TIME 12:30 (AM/PM) DATE 1-5-94
COMPLETION TIME 3:45 (AM/PM) DATE 1-5-94
CEMENT COMPANY Fellows