

RECEIVED  
KANSAS CORPORATION COMMISSION

STATE OF KANSAS  
KANSAS CORPORATION COMMISSION  
CONSERVATION DIVISION  
130 South Market - Room 2078  
Wichita, Kansas 67202

SEP 23 1997

FORM CP-1 (3/92)

**WELL PLUGGING APPLICATION FORM**

CONSERVATION DIVISION (PLEASE TYPE FORM and File ONE Copy)  
WICHITA, KS

API # 15-069-20,265-0000 (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 Knighton Oil Company, Inc. KCC LICENSE # 5010  
(owner/company name) (operator's)

ADDRESS 221 S. Broadway, #710 CITY Wichita

STATE Kansas ZIP CODE 67202 CONTACT PHONE # (316) 264-7918

LEASE Hands WELL# 1 SEC. 10 T. 24S R. 30 (East/West)

1650' FSL - 330' FEL SPOT LOCATION/QQQQ COUNTY Gray

1650' FEET (in exact footage) FROM (S)/N (circle one) LINE OF SECTION (NOT Lease Line)

330' 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 249' CEMENTED WITH 180 SACKS

PRODUCTION CASING SIZE \_\_\_\_\_ SET AT \_\_\_\_\_ CEMENTED WITH \_\_\_\_\_ SACKS

LIST (ALL) PERFORATIONS and BRIDGEPLUG SETS: \_\_\_\_\_

ELEVATION 2832'/2837' T.D. \_\_\_\_\_ PBDT \_\_\_\_\_ ANHYDRITE DEPTH \_\_\_\_\_  
(G.L./K.B.) (Stone Corral Formation)

CONDITION OF WELL: GOOD  POOR  CASING LEAK  JUNK IN HOLE

PROPOSED METHOD OF PLUGGING 1st plug at 2045' with 50 sks, 2nd plug at 1030' with 80 sks; 3rd plug at 550' with 40 sks, 4th plug at 260' with 40 sks, 5th plug at 40' with 10 sks. Rat hole with 15 sks, cemented with 235 sks 60/40 pos, 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? Enclosed

If not explain why? \_\_\_\_\_ N/A

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:

Walter Brown PHONE# (316) 855-7063

ADDRESS Box 1139 City/State Cimarron, KS 67835

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

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

PROPOSED DATE AND HOUR OF PLUGGING (If Known?) 09-06-97 at 11:45 p.m.

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

DATE: 9-24-97 AUTHORIZED OPERATOR/AGENT: [Signature]  
(signature)

EFFECTIVE DATE: 9-2-97  
DISTRICT # 1  
SGA? Yes  No

State of Kansas 15-069-20,265-0000  
NOTICE OF INTENTION TO DRILL  
ALL BLANKS MUST BE FILLED

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

Expected Spud Date ..August.....30.....1997.....  
month day year

Spot \_\_\_\_\_ East  
SE - NE - SE Sec .10. Twp .24. S, Rg .30. XX West

OPERATOR: License # .....5010.....  
Name: .....Knighton Oil Company, Inc.....  
Address: .....221 S. Broadway, Suite 710.....  
City/State/Zip: .....Wichita, Kansas 67202.....  
Contact Person: .....Earl M. Knighton, Jr/David D. Montague.....  
Phone: .....(316) 264-7918.....

.....1650..... feet from South/ North line of Section  
.....330..... 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.....

Well Drilled For: Well Class: Type Equipment:  
X.. Oil ... Enh Rec ... Infield .X. Mud Rotary  
X.. Gas ... Storage ... Pool Ext. ... Air Rotary  
... CWWO ... Disposal .X. Wildcat ... Cable  
... Seismic; ... # of Holes ... Other  
... Other .....  
if CWWO: old well information as follows:  
Operator: .....  
Well Name: .....  
Comp. Date: ..... Old Total Depth .....

Lease Name: ..Hands..... Well #: .....1.....  
Field Name: ..Wildcat.....  
Is this a Prorated/Spaced Field? .... yes .X.. no  
Target Formation(s): .....Pennsylvanian & Mississippian  
Nearest lease or unit boundary: .....330'.....  
Ground Surface Elevation: .....2832..... feet MSL  
Water well within one-quarter mile: .... yes .X.. no  
Public water supply well within one mile: .... yes .X.. no  
Depth to bottom of fresh water: .....200'.....  
Depth to bottom of usable water: .....1030'.....  
Surface Pipe by Alternate: .... 1 .X.. 2  
Length of Surface Pipe Planned to be set: .....220'.....  
Length of Conductor pipe required: .....N/A.....  
Projected Total Depth: .....4950'.....  
Formation at Total Depth: .....Mississippian.....  
Water Source for Drilling Operations:  
... well .... farm pond .X. other

Directional, Deviated or Horizontal wellbore? .... yes .X. no  
If yes, true vertical depth:.....  
Bottom Hole Location.....  
Exp. 2/28/98

Will Cores Be Taken?: .... yes .X. no  
If yes, proposed zone: .....

220' Alt. II Req.

AFFIDAVIT

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

Pusher Walter Brown

SPUD DATE 8-30-97 INIT. SA

LENGTH SURFACE PLANNED 220'

RESERVE PIT STATUS- REMOVE FLUID \_\_\_\_\_ LINED \_\_\_\_\_  
after salt sect. bbls. when done bbls. \_\_\_\_\_

RATHOLED AHEAD? Y \_\_\_\_\_ N \_\_\_\_\_ SIZE HOLE \_\_\_\_\_

SURFACE PIPE 8 5/8" @ 249' CONDUCTOR \_\_\_\_\_

ANHYDRITE T- \_\_\_\_\_ B- 284' ELEVATION \_\_\_\_\_

TD 4937' FORMATION Plug

RAN PIPE @ \_\_\_\_\_ DV TOOL \_\_\_\_\_ ALT II DONE \_\_\_\_\_  
SX Y N

Arbuckle Plug @ \_\_\_\_\_ Ft. W/ \_\_\_\_\_ SX

lug./Council @ \_\_\_\_\_ Ft. W/ \_\_\_\_\_ SX

Anhydrite Base @ 204' Ft. W/ 50 SX ✓

1/2 Base Anyh. @ 1030 Ft. W/ 80 SX ✓

1/2, 1/2 Plug @ 550 Ft. W/ 40 SX ✓

Bottom Surface @ 200 Ft. W/ 40 SX ✓

40' Plug @ 410 Ft. W/ 10 SX ✓

RAT HOLE CIRC/W 15 SX MOUSE HOLE W/ \_\_\_\_\_ SX

WATER WELL \_\_\_\_\_ SX (Irr. Well \_\_\_\_\_ Pond \_\_\_\_\_)  
Hauling \_\_\_\_\_

TECHNICIAN SM DATE 9-5-97

TYPE OF CEMENT 60/90 670/14 235 SX

STARTING TIME \_\_\_\_\_ (AM/PM) DATE \_\_\_\_\_

COMPLETION TIME 11:45 (AM/PM) DATE 9-6-97

CEMENT COMPANY Adco