

STATE OF KANSAS
STATE CORPORATION COMMISSION
CONSERVATION DIVISION
245 North Water
WICHITA, KANSAS 67202

Rev. 6-3-74
FORM CP-1

WELL PLUGGING APPLICATION FORM
File One Copy

API Number 15 - 055 - 20557 - 0000 (of this well)
Lease Owner Spines Exploration, Inc.
Address 530 Fourth Financial Center, Wichita, Kansas
Lease (Farm Name) KM Winter Trust Well No. 1
Well Location NE NW Sec. 20 Twp. 22S Rge. 27W
County Finney Total Depth 5000 Field Name _____
Oil Well _____ Gas Well _____ Input Well _____ SWD Well _____ Rotary D & A X
Well Log attached with this application as required Yes
Date and hour plugging is desired to begin 5/30/84 6:00 a.m.

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:

Address _____
Plugging Contractor CHEYENNE DRILLING, INC. License No. _____
515 R.H. Garvey Building
Address Wichita, Kansas 67202

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

Name Spines Exploration, Inc.
Address 530 Fourth Financial Center, Wichita, Kansas

and payment will be guaranteed by applicant or acting agent.

RECEIVED
STATE CORPORATION COMMISSION

JUN 08 1984

CONSERVATION DIVISION
Wichita, Kansas

Signed: _____

A. J. Jacques
Applicant or Acting Agent

Date: _____

June 6, 1984