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

WELL PLUGGING APPLICATION FORM File One Copy

FORM CP-1
CONSERVATION OF THE CORP. TO STATE CONSERVATION OF THE CONSERVATIO
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Lease Owner	Emit Papay			
Address	P. O. Box 656 Great Bend, Kar	SaS		
Lease (Farm Name)	Harrouff		Well No. 1	
Well Location	NE SE NW Sec. 27 Twp.			
County	Stafford	_Field Name (If Any)		
Total Depth	3837½ Oil Well Gas	WellInput Well	SWD WellD & A	
Well Log filed wi	th application Yes	_or Well Log filed with	Plugging Supervisor	
Date and hour plugging is desired to begin <u>Immediately</u> 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 Emit Papay				
	P. O. Box 656	_Address Great Bend	, Kansas	
	or Forbes Casing Pulling Co., I			
	P. O. Box 221 Great Bend			
Invoice covering assessment for plugging this well should be sent to Emit Papay				
	P. 0. Box 656 Ad	dress Great Bend	, Kansas	
and payment will	pe guaranteed by applicant.	ned: Applicant of	Secretary or Acting Agent	
	Dat	e: <u>May l. 1970</u>		



State Corporation Commission

CONSERVATION DIVISION

(Oil, Gas and Water)

500 Insurance Bldg.

212 N. Market

WICHITA, KANSAS 67202

May 5, 1970

WELL PLUGGING AUTHORITY

Well No.

Lease

Description

Harrouff

County

NE SE NW 27-22-13W Stafford

Total Depth

3337

1

Plugging Contractor

Forbes Casing Pulling Co.

Emit Papay P. O. Box 656 Great Bend, Kansas 67530

Gentlemen:

This is your authority to plug the above subject well in accordance with the Rules and Regulations of the State Corporation Commission.

This authority is void after 90 days from the above date.

Very truly yours,

Jf Lewis Brock, Administrator

Mr. G. Russell Biberstein Attica, Kansas 67009 is hereby assigned to supervise the plugging of the above named well.