

WELL PLUGGING APPLICATION FORM

Well Location c/NW1NW1 Sec. 27 Twp. 22 Rg	ge _{'•} (E) (W) <u>12</u>
Field Name (if any) County_	Stafford
Lease (Farm Name) Heyen	Well No. 1-R
Was well log filed with application? Yes If	not, explain circumstances
and give available data (Use an additional	sheet if necessary)
	
Date and hour plugging is desired to begin	7/14/44 10:00 A.M.
Plugging of the well will be done in accord	dance with the Rules and
Regulations of the State Corporation Commis	ssion, or with the approval
of the following exceptions; Explain fully any exceptions desired	
(Use an additional sheet if necessary)	
Name of the person on the lease in charge of well for owner	
W. T. Parker Address Hoke Bldg., Hutchinson, Kansas	
Name of well owner or Acting Agent Pulse-Hershfield Drilling Co.	
Address Hoke Bldg., Hutchinson, Kansas	
Invoice covering assessment for plugging th	nis well should be sent to:
Western Drilling Co., Inc. Address 315 Derby Bldg., Wichita 2, Kansas	
and payment will be guaranteed by applion	
N. War	14194
PLUGGING Operat	tor or Acting Agent
FILE SECZYTZZRIZW Date 2.	-12-47
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STATE OF KANSAS STATE CORPORATION COMMISSION

CONSERVATION DIVISION 800 BITTING BUILDING WICHITA, KANSAS May 12, 1947

IN REPLY PLEASE REFER TO THIS SUBJECT

Well No.

Lease

lleven

Description C/NV: NW 24-22-12W

County

Stafford

File:

109-20

H. A. Bershfield 315 Derby Building Vichita, Kansas

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Dear Sir:

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

Very truly yours,

STATE CORPORATION COMMISSION CONSTRUCTION DIVISION

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II.W. Kerr Box 207 NOTICE:

Groat Hend, Kana.