

15.145-21050-0000

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

FORM CP-1

WELL PLUGGING APPLICATION FORM
File One Copy

Lease Owner L. D. Davis/ L. D. Drilling, Inc.

Address Route 1, Box 183-B, Great Bend, Kansas 67530

Lease (Farm Name) Kasselman Well No. 1

Well Location C/ SE/ SE Sec. 21 Twp. 21 Rge. 15 (E) (W)

County Pawnee Field Name (If Any) _____

Total Depth 3900' Oil Well Gas Well _____ Input Well _____ SWD Well _____ D & A _____

Well Log filed with application or Well Log filed with Plugging Supervisor _____

Date and hour plugging is desired to begin 09/28/83 9:00

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 D. S. & W. Well Servicing, Inc.

Address P. O. Box 231, Claflin, Kansas 67525

Plugging Contractor D S & W. Well Servicing, Inc. License No. 6901

Address P. O. Box 231, Claflin, Kansas 67525

Invoice covering assessment for plugging this well should be sent to L. D. Davis Drilling, Inc.

Route 1, Box 183-B, Great Bend, Kansas Address _____

and payment will be guaranteed by applicant.

Signed: [Signature]
Applicant or Acting Agent

Date: _____

RECEIVED
STATE CORPORATION COMMISSION

10-5-83

OCT 5 1983

CONSERVATION DIVISION
Wichita, Kansas