

KANSAS STATE CORPORATION COMMISSION CONSERVATION DIVISION 800 Bitting Building Wichita, Kansas

WELL PLUGGING APPLICATION

Well Location SEc-SW Sec. /3 Twp. 2/ Rge. / COUSERV. DIV.
Field Name (if any) County PAWNEE
Lease (Farm Name) RALPH W. HEWSON Well No. /
Was well log filed with application? Yes If not, explain circumstances
and give available data (Use an additional sheet if necessary)
Will the plugging of the well be done inscordance with the Rules and
Regulations of the Kansas State Corporation Commission? VES If not,
explain fully exceptions desired (Use an additional sheet if necessary)
FILE SES 13-1-212-17W BOOK PAGE 7-BLINE-12-1
Date abandonment is desired to begin whe 29 1937
Name of the person on the lease in charge of the well for owner
Address
Name of well owner or acting agent Simpson Oir Co.
Address FIRST NATIONAL BANT BLOE, WICHITA, KS
To whom should invoice covering assessment for plugging well be sent?
SIMPSON D. T. Co. Address FIRST NAT'L BLOG, WICHITH, KS
Simpson Oir Co Operator or Acting Agent
Date 6-28-1937