Form CP-1

STATE OF KANSAS
STATE CORPORATION COMMISSION
CONSERVATION DIVISION
500 INSURANCE BUILDING
212 NORTH MARKET
WICHITA 2, KANSAS

WELL PLUGGING APPLICATION FORM File One Copy

Lease Owner C 8	S Well Servi	cing Com	oany			_ 	·
(Applicant) AddressBox	526, Lyons,	Kansas		_		~	
Lease (Farm Name)	Waknitz				We:	11 No	1
Well Location NW	NE SE	Sec. 9	Twp.	Rge.	(E)	9 (W)	
CountyRi	.ce		_Field Name	e (If an	y)	 	
Total Depth3550	Oil Well_	Gas We	llInpi	ıt Well_	SWD Well	D & A	х
Total Depth 3550	ith application?	Yes		If not,	explain:	RECEIPE	** 7 h
					 	CORPORATI	OF THE PROPERTY OF
				<u></u>			
Date and hour pluggi	ng is desired to	begin	January 6	, 1966	COA	SFOLL	
Plugging of the well	will be done ir	accordanc	e with the	Rules a	nd Regulatio	Wichita tipe	DIVISION
							Sag
Corporation Commissi	on.						
Name of the person o	n the lease in c	harge of w	ell owner_		Clarence	Michael	
· · · · · · · · · · · · · · · · · · ·		Ad	dress		 		·
Plugging Contractor_	Sage Drilling Co.				License No.		
Address	500 Bitting Building, Wichita, Kansas						
Invoicé covering ass	essment for plug	ging this	well should	l be sent	t toC&	S Well S	ervicing
					ns, Kansa		
and payment will be	guaranteed by ap	- —			<i>M:</i>	0	
		Si	gned:/	one	M	Ulue	
				App Drilli	olicant or A	Acting Age	nt
		Da [.]	te:		1/6/66		

State of Kansas

WM. H. AVERY

HARRY G. WILES

WILLIAM L. MITCHELL

JAMES O. GREENLEAF

RAYMOND B. HARVEY

E. EDWARD JOHNSON

15.159.30220.0000

State Corporation Commission

CONSERVATION DIVISION

(Oil, Gas and Water)
500 Insurance Bldg. 212 N. Market
WICHITA, KANSAS 67202

January 10, 1966

WELL PLUGGING AUTHORITY

Well No.

Lease

liaimi tz

Description

NV NE SE Sec. 9-21-94 Rice

County Total Depth

3540°

C & S Well Sorvicing Company

P. O. Box 526 Lgons, Kansas

Governor

Chairman

Secretary

Commissioner

Commissioner

Gon. Counsel

Plugging Contractor

Sage Drig. Co., Inc.

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,

Gilbert Toman, P. O. Box 180, Holyrood, Kenses 67450

Mr.
is hereby assigned to supervise the plugging of the above named well.