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 Boyaird Supply Co.	CONSERVATION DEVISION
(Applicant) Address P.O. Box 897 Great Bend, Kansa	
·	Well No. #2
Well Location SE NW NE Sec. 21	Twp. 21 Rge. 13 (E) (W) x
CountyStafford	Field Name (If any)
Total Depth 3672' Oil Well Gas We	ellInput WellSWD WellD & A
Was well log filed with application? N	oIf not, explain:
	Will follow
Date and hour plugging is desired to begin_	At once
	ce with the Rules and Regulations of the State
Corporation Commission.	
Name of the person on the lease in charge of t	well owner
	idress Great Bend, Kansas
	Co., Inc. License No. 399
Address Box 364, Great Bend, Kansas	
Invoice covering assessment for plugging this	well should be sent to
Boyaird Supply Co. Addre	ess Box 897, Great Bend, Kansas
and payment will be guaranteed by applicant.	
	,
S:	igned: Sidning D. William
	igned: Sidning D. Williams Applicant or Acting Agent
Da	ite:April 21, 1966

Governor

Chairman

Secretary

Commissioner

Commissioner

Gen. Counsel

WM. H. AVERY

HARRY G. WILES

WILLIAM L. MITCHELL

JAMES O. GREENLEAF

RAYMOND B. HARVEY

E. EDWARD JOHNSON



State Corporation Commission

CONSERVATION DIVISION

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

April 22, 1966

WELL PLUGGING AUTHORITY

Well No.
Lease
Description
County
Total Depth
Plugging Contractor

Hoffman "A" SE NW NE 21-21-13W

Southwest Casing Pulling

Stafford 3672'

Bovaird Supply Company P. O. Box 897 Great Bend, Kansas

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,

J. P. Roberts, Administrator

Mr. A. Elving Box 248 Pratt, Kensas is hereby assigned to supervise the plugging of the above named well.