

STATE OF KANSAS
STATE CORPORATION COMMISSION
CONSERVATION DIVISION
200 Colorado Derby Building
Wichita, Kansas 67202

FORM CP-1
Rev. 6/4/84

WELL PLUGGING APPLICATION FORM
(File One Copy)

API NUMBER 15-185-22,667-0000 (of this well)
(This must be listed; if no API# was issued, please note drilling completion date.)

LEASE OPERATOR L. D. Drilling, Inc. OPERATORS LICENSE NO. 6039

ADDRESS R.R. 1 Box 183 B Great Bend, Kansas 67530 PHONE # (316) 793-3051
100' S

LEASE (FARM) Reta WELL NO. 1 WELL LOCATION E/2 NE SW COUNTY STAFFORD

SEC. 19 TWP. 21S RGE. 12 (E) or (W) TOTAL DEPTH 3640' PLUG BACK TD _____

Check One:

OIL WELL _____ GAS WELL _____ D & A XX SWD or INJ WELL _____ DOCKET NO. _____

SURFACE CASING SIZE 8 5/8" SET AT 302' CEMENTED WITH 200 SACKS

CASING SIZE _____ SET AT _____ CEMENTED WITH _____ SACKS

PERFORATED AT _____

CONDITION OF WELL: GOOD xx POOR _____ CASING LEAK _____ JUNK IN HOLE _____

OPERATOR'S SUGGESTED METHOD OF PLUGGING THIS WELL _____

(If additional space is needed use back of form)

IS WELL LOG ATTACHED TO THIS APPLICATION AS REQUIRED? yes IS ACO-1 FILED? by operator
(If not, explain)

DATE AND HOUR PLUGGING IS DESIRED TO BEGIN 4-27-90 12:30 A.M.

PLUGGING OF THIS WELL WILL BE DONE IN ACCORDANCE WITH K.S.A. 55-101 et seq AND THE RULES AND REGULATIONS OF THE STATE CORPORATION COMMISSION.

NAME OF COMPANY REPRESENTATIVE AUTHORIZED TO BE IN CHARGE OF PLUGGING OPERATIONS:

Greg Davidson PHONE # (316) 793-3051

ADDRESS Great Bend, Ks. 67530

PLUGGING CONTRACTOR Allied Cementing, Inc. LICENSE NO. _____

ADDRESS Russell, Ks. 67665 PHONE # () _____

PAYMENT WILL BE GUARANTEED BY OPERATOR OR AGENT SIGNED: Greg Davidson
(Operator or Agent)
Greg Davidson

DATE: May 31, 1990

1990
MAY 31 1990