

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

FORM CP-1
Rev.03/92

WELL PLUGGING APPLICATION FORM
(PLEASE TYPE FORM and File ONE Copy)

API # 15-185-22,925-0000 (Identifier number of this well). This must be listed for wells drilled since 1967; if no API# was issued, indicate spud or completion date.

WELL OPERATOR Coats & Malone, Inc. KCC LICENSE # 30211
(owner/company name) (operator's)

ADDRESS P.O.Box 744 CITY Wichita

STATE Kansas ZIP CODE 67201-0744 CONTACT PHONE # (316) 262-7777

LEASE Schartz-Kelly WELL# 1-11 SEC. 11 T. 21 S. R. 14 (East/West)

75'N - SE - NW - NE SPOT LOCATION/QQQQ COUNTY Stafford

4365 FEET (in exact footage) FROM S/N (circle one) LINE OF SECTION (NOT Lease Line)

1650 FEET (in exact footage) FROM E/W (circle one) LINE OF SECTION (NOT Lease Line)

Check One: OIL WELL GAS WELL D&A SWD/ENHR WELL DOCKET# _____

CONDUCTOR CASING SIZE _____ SET AT _____ CEMENTED WITH _____ SACKS

SURFACE CASING SIZE 8 5/8 SET AT 370 CEMENTED WITH 225 SACKS

PRODUCTION CASING SIZE _____ SET AT _____ CEMENTED WITH _____ SACKS

LIST (ALL) PERFORATIONS and BRIDGEPLUG SETS: _____

ELEVATION 1919/ 1927 T.D. _____ PSTD _____ ANHYDRITE DEPTH 815' (top)
(G.L./K.B.) (Stone Corral Formation)

CONDITION OF WELL: GOOD POOR CASING LEAK JUNK IN HOLE

PROPOSED METHOD OF PLUGGING 50 sks at 840', 50 sks in & out of surface casing,

10 sks 40' to surface

(If additional space is needed attach separate page)

IS WELL LOG ATTACHED TO THIS APPLICATION AS REQUIRED? with IS ACO-1 FILED? yes
ACO-1

If not explain why? log with ACO-1

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.

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

Casey Coats PHONE# (316) 262-7777

ADDRESS P.O.Box 744 City/State Wichita, Ks 67201-0744

PLUGGING CONTRACTOR Duke Drilling Co., Inc. KCC LICENSE # 5929

(company name) (contractor's)
ADDRESS 310 W. Central, Ste 202 Wichita, Ks 67202 PHONE # (316) 267-1331

PROPOSED DATE AND HOUR OF PLUGGING (if known?) 9/23/93 2:15 am

PAYMENT OF THE PLUGGING FEE (K.A.R. 82-3-118) WILL BE GUARANTEED BY OPERATOR OR AGENT

DATE: 10-5-93 AUTHORIZED OPERATOR/AGENT Casey Coats
KANSAS CORPORATION COMMISSION (signature)

OCT 05 1993

CONSERVATION DIVISION
WICHITA, KS

TYPE OR PRINT
 NOTICE: Fill out completely
 and return to Cons. Div.
 office within 30 days.

LEASE OPERATOR _____

ADDRESS _____

PHONE#() _____ OPERATORS LICENSE NO. _____

Character of Well _____

(Oil, Gas, D&A, SWD, Input, Water Supply Well)

Date Well Completed _____

Plugging Commenced _____

Plugging Completed _____

The plugging proposal was approved on _____ (date)

by _____ (KCC District Agent's Name).

Is ACO-1 filed? _____ If not, is well log attached? _____

Producing Formation _____ Depth to Top _____ Bottom _____ T.D. _____

Show depth and thickness of all water, oil and gas formations.

OIL, GAS OR WATER RECORDS

CASING RECORD

Formation	Content	From	To	Size	Put In	Pulled out

Describe in detail the manner in which the well was plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. If cement or other plug were used, state the character of same and depth placed, from _____ feet to _____ feet each section.

Name of Plugging Contractor _____ License No. _____

Address _____

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: _____

STATE OF _____ COUNTY OF _____, ss.

 (Employee of Operator) or (Operator) of
 above-described well, being first duly sworn on oath, says: That I have knowledge of the facts
 statements, and matters herein contained and the log of the above-described well as filed the
 the same are true and correct, so help me God.

(Signature) _____

(Address) _____

SUBSCRIBED AND SWORN TO before me this _____ day of _____, 19 _____

Notary Public

My Commission Expires: _____

USE ONLY ONE SIDE OF EACH FORM