## RECEIVED KANSAS CORPORATION COMMISSION 1

## STATE OF KANSAS STATE CORPORATION COMMISSION CONSERVATION DIVISION 130 South Market, Room 2078 Wichita, Kansas 67202-3802

SEP 09 1997

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

APICO#SENSALMSDM2DMA70000 (Identifier number of this well). This must be listed for wells and the distance 1967; if no API# was issued, indicate spud or completion date.
WELL OPERATOR Deutsch Oil Company KCC LICENSE # 3180
WELL OPERATOR Deutsch Oil Company (owner/company name) KCC LICENSE # 3180 (operator's)  ADDRESS 107 North Market - Suite 1115 CITY Wichita
STATE <u>Kansas</u> ZIP CODE <u>67202</u> CONTACT PHONE # (316) <u>267-7551</u>
LEASE <u>Hill</u> WELL # 1-31 SEC. 31 T. 23 R. 15 XEXXX/West)
W/2 - W/2- MW - SPOT LOCATION/0000 COUNTY Pawnee County, Kansas
1320 FEET (in exact footage) FROM S/N (circle one) LINE OF SECTION (NOT Lease Line)
330 FEET (in exact footage) FROM E/W (circle one) LINE OF SECTION (NOT Lease Line)
Check One: OIL WELL GAS WELL D&A X SWD/ENHR WELL DOCKET#
CONDUCTOR CASING SIZE SET AT CEMENTED WITH SACKS
SURFACE CASING SIZE 8-5/8" SET AT 262 CEMENTED WITH 190 SACKS
PRODUCTION CASING SIZE SET AT CEMENTED WITH SACKS
LIST (ALL) PERFORATIONS and BRIDGEPLUG SETS:
ELEVATION 2050/2058 T.D. 4200 PBTD 4200 ANHYDRITE DEPTH 924 (Stone Corral Formation)
CONDITION OF WELL: GOOD X POOR CASING LEAK JUNK IN HOLE
PROPOSED METHOD OF PLUGGING 40 sx. @ 4160', 50 sx. @ 1000', 50sx. @ 290' 10 sx. @ 40', 15 sx. mousehole & rathole.
(If additional space is needed attach separate page)
IS WELL LOG ATTACHED TO THIS APPLICATION AS REQUIRED? Yes IS ACO-1 FILED? Yes
If not explain why?
PLUGGING OF THIS WELL WILL BE DONE IN ACCORDANCE WITH K.S.A. 55-101 $\underline{\text{et.}}$ $\underline{\text{seq.}}$ AND THE RULES AND REGULATIONS OF THE STATE CORPORATION COMMISSION.
LIST NAME OF COMPANY REPRESENTATIVE AUTHORIZED TO BE IN CHARGE OF PLUGGING OPERATIONS:
Kent Deutsch PHONE# (316) 267-7551
ADDRESS 107 N. Market Su. 1115 City/State Wichita, Kansas 67202
PLUGGING CONTRACTOR Allied Cementing Co KCC LICENSE # (company name) (contractor's)
ADDRESS PHONE# ( )
PROPOSED DATE AND HOUR OF PLUGGING (If Known?) 5:45 AM 07/10-97
PAYMENT OF THE PLUGGING FEE (K.A.R. 82-3-118) WILL BE GUARANTEED BY OPERATOR OR AGENT
DATE: 920/97 AUTHORIZED OPERATOR/AGENT: Sufficienture)