

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

FORM CP-1 (3/92)

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

API # 15-145-21460-0001 (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 Himco Oil & Gas, Inc. KCC LICENSE # 32891 8/03
(owner/company name) (operator's)

ADDRESS P.O. Box 2365, University Station CITY Enid

STATE OK ZIP CODE 73702-2365 CONTACT PHONE # (405) 853-6199

LEASE B & W Sales WELL# 1-2 SEC. 2 T. 23S R. 17 (East/West)

W/2 - W/2 - SW/4 - SPOT LOCATION/QQQQ COUNTY Pawnee

1,320 FEET (in exact footage) FROM (S) (circle one) LINE OF SECTION (NOT Lease Line)

400 FEET (in exact footage) FROM (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 365' CEMENTED WITH 225 SACKS

PRODUCTION CASING SIZE 5 1/2 SET AT 4,347' CEMENTED WITH 325 SACKS

LIST (ALL) PERFORATIONS and BRIDGEPLUG SETS: "See Attachment"

ELEVATION 2,082' 2,090' T.D. 4,350' PBDT 4,295' ANHYDRITE DEPTH 1,121'
(G.L./K.B.) (Stone Corral Formation)

CONDITION OF WELL: GOOD POOR CASING LEAK JUNK IN HOLE

PROPOSED METHOD OF PLUGGING As per KCC Rules & Regulations

(If additional space is needed attach separate page)

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

If not explain why? _____

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:

Mike's Testing & Salvage PHONE# () 800-684-2943

ADDRESS P.O. Box 467 City/State Chase, KS 67524

PLUGGING CONTRACTOR Mike's Testing & Salvage KCC LICENSE # 31529 9/03

ADDRESS P.O. Box 467, Chase, KS 67524 (company name) (contractor's)
PHONE # () 800-684-2943

PROPOSED DATE AND HOUR OF PLUGGING (If Known?) _____

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

DATE: 06/04/03 AUTHORIZED OPERATOR/AGENT: [Signature]
(signature)