

WELL PLUGGING APPLICATION FORM
FILE ONE COPY

API NUMBER 2-25-86 (OF THIS WELL)
(THIS MUST BE LISTED, IF NO API# AVAILABLE PLEASE NOTE DRILLING COMPLETION DATE.)

LEASE OWNER TXO Production Corp.

ADDRESS 200 W. Douglas, Suite #300 Wichita, KS 67202

LEASE (FARM NAME) Hargadine WELL NO. #

WELL LOCATION SE NE SEC. 34 TWP. 28S RGE. 20 ~~EAST~~ (WEST)

COUNTY Kiowa TOTAL DEPTH 5070 FIELD NAME

OIL WELL GAS WELL INPUT WELL STD WELL D&A

WELL LOG ATTACHED WITH THIS APPLICATION AS REQUIRED? log is attached
(IF NOT STATE REASON WHY)

DATE AND HOUR PLUGGING IS DESIRED TO BEGIN 1:00 p.m. 2-25-86

PLUGGING OF THIS WELL WILL BE DONE IN ACCORDANCE WITH K.S.A. 55-128 OF THE RULES AND REGULATIONS OF THE STATE CORPORATION COMMISSION

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

Paul Luthi ADDRESS Dodge City, KS

PLUGGING CONTRACTOR B. J. Titan LICENSE NO.

ADDRESS Medicine Lodge

INVOICE COVERING ASSESSMENT FOR PLUGGING THIS WELL SHOULD BE SENT TO:

NAME TXO Prod. Corp.

ADDRESS same as above

NO PAYMENT WILL BE GUARANTEED BY APPLICANT OF ACTING AGENT.

SIGNED: [Signature]
APPLICANT

DATE: 2-27-86

3-3-86
RECEIVED
STATE CORPORATION COMMISSION
MAR 3 1986
CONSERVATION DIVISION
Wichita, Kansas