

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

FORM CP-1 (3/92)

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

API # 15-007-22516 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 Timson Oil & Gas Company KCC LICENSE # 31918
(owner/company name) (operator's)

ADDRESS 427 S. Boston, #2300 CITY Tulsa

STATE Oklahoma ZIP CODE 74103-4128 CONTACT PHONE # (918) 599-0009

LEASE Stephens WELL# 2-3 SEC. 3 T. 32S R. 11W ~~(Range)~~ (West)

C S/2 NW SPOT LOCATION/OOOO COUNTY Barber County, Kansas

3300 FEET (in exact footage) FROM S (circle one) LINE OF SECTION (NOT Lease Line)

1320 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 310' CEMENTED WITH 195 SACKS

PRODUCTION CASING SIZE _____ SET AT _____ CEMENTED WITH _____ SACKS

LIST (ALL) PERFORATIONS and BRIDGEPLUG SETS: none

ELEVATION 1557/1565 T.D. 3825' PBD 3800' ANHYDRITE DEPTH 1135'
(G.L./K.B.) (Stone Corral Formation)

CONDITION OF WELL: GOOD POOR CASING LEAK JUNK IN HOLE

PROPOSED METHOD OF PLUGGING _____ RECEIVED STATE CORPORATION COMMISSION

9-16-96
SEP 18 1996

(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 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:

Dale Leavitt Jr. PHONE# (405) 620-7597

ADDRESS 814 Sunnybrook Court City/State Edmond, OK 73034

PLUGGING CONTRACTOR Allied Cementing Co., Inc. KCC LICENSE # NA

ADDRESS P. O. Box 31 Russell, KS 67665 PHONE # (913) 483-2627
(company name) (contractor's)

PROPOSED DATE AND HOUR OF PLUGGING (If Known?) 1:45 PM 08-20-96

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

DATE: 9-13-96 AUTHORIZED OPERATOR/AGENT: Glenn H. Timson (signature)