

STATE OF KANSAS
STATE CORPORATION COMMISSION
CONSERVATION DIVISION
245 North Water
WICHITA, KANSAS 67202

Rev. 6-3-74
FORM CP-1

WELL PLUGGING APPLICATION FORM
File One Copy

API Number 15 - 155 - 20831-0000 (of this well)
Lease Owner Western Drilling & Exploration
Address 439 Wheatland Place Wichita, Kansas 67235
Lease (Farm Name) Graber Well No. #2
Well Location NE SW NE Sec. 34 Twp. 23S Rge. 4 (E) _____ (W) X
County Reno Total Depth 3623' Field Name _____
Oil Well _____ Gas Well _____ Input Well _____ SWD Well _____ Rotary D & A X
Well Log attached with this application as required Yes
Date and hour plugging is desired to begin 10-21-81 9:00 p.m.

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:

Wayne Webb Address 7701 E. Kellogg, #575 Wichita, KS.

Plugging Contractor Aspen Oil, Inc. Exploration License No. _____
RECEIVED
STATE CORPORATION COMMISSION

Address 7701 East Kellogg, Suite 575 Wichita, Kansas 67207

Invoice covering assessment for plugging this well should be sent to:

Name Western Drilling & Exploration, Inc.

Address 439 Wheatland Place Wichita, Kansas 67235

OCT 27 1981
CONSERVATION DIVISION
Wichita, Kansas

10-27-81

and payment will be guaranteed by applicant or acting agent.

Signed: Stephanie R. Dack
Applicant or Acting Agent

Date: October 22, 1981

STATE OF KANSAS

STATE CORPORATION COMMISSION
CONSERVATION DIVISION
200 Colorado, Derby Bldg.
Wichita, Kansas 67202-1286

INVOICE and WELL PLUGGING AUTHORITY

November 25, 1981

INVOICE NUMBER: 8509-W

TO: Western Drilling and Exploration
439 Wheatland Pl,
Wichita, KS. 67235

15-155-20831-0000

PLUGGING ASSESSMENT AS FOLLOWS:

PAYABLE UPON RECEIPT

Graber #2
NE SW NE, Sec. 34-23S-4W
Reno
T.D. 3623' \$117.75

NOTE: We also need the following before our file is completed:

- _____ Well Plugging Record (CP-4)
- _____ Well Log
- _____ Well Plugging Application (CP-1)

WELL PLUGGING AUTHORITY

Gentlemen:

This is your authority to plug the above subject well in accordance with the rules and regulations of the state corporation commission.

This authority is void after ninety (90) days from the above date.



Administrator

Mr. Gib Toman, Box 180, Holyrood, KS. 67450

is hereby assigned to supervise the plugging of the above mentioned well.

RETURN PINK COPY WITH REMITTANCE