WELL PLUGGING APPLICATION FORM
(File One Copy)

API NUMBER 6-26-53-Completed (of this well)
(This must be listed; if no API# was issued, please note drilling completion date.)

LEASE OPERATOR Texaco Inc. OPERATORS LICENSE NO. 5153
ADDRESS Box 2420 PHONE # (918) 560-6205

LEASE (FARM) Jennings Unit WELL NO. #2 WELL LOCATION C SE NW COUNTY Decatur

SEC. 25 TWP. 4S RGE. 27 (E)or(W) TOTAL DEPTH 1831' PLUG BACK TD 1794'

Check One:

OIL WELL x GAS WELL D & A SWD or INJ WELL x DOCKET NO.

SURFACE CASING SIZE 10-3/4 SET AT 640 CEMENTED WITH 600 SACKS
CASING SIZE 7 SET AT 1830 CEMENTED WITH 100 SACKS
PERFORATED AT 1680-1780'

CONDITION OF WELL: GOOD POOR xx CASING LEAK JUNK IN HOLE xx

OPERATOR'S SUGGESTED METHOD OF PLUGGING THIS WELL In accordance with state rules and regulations.

(If additional space is needed use back of form)

IS WELL LOG ATTACHED TO THIS APPLICATION AS REQUIRED? Not Available IS AOO-1 FILED? Yes

DATE AND HOUR PLUGGING IS DESIRED TO BEGIN 5/27/86 AM

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.

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

T. E. Jackson PHONE # (316) 792-2193
ADDRESS RR 2, Box 201, Great Bend, Ks 67530

PLUGGING CONTRACTOR Company Tools

ADDRESS

LICENSE NO. PHONE # ( )

PAYMENT WILL BE GUARANTEED BY OPERATOR OR AGENT RECEIVED STATE CORPORATION COMMISSION

SIGNED: R. W. BLOHM (Operator or Agent)

Asst District Manager

DATE: 7/3/86