

## Kansas Corporation Commission Oil & Gas Conservation Division

1034784

Form CP-1
March 2009
This Form must be Typed
Form must be Signed
All blanks must be Filled

## **WELL PLUGGING APPLICATION**

Please TYPE Form and File ONE Copy

| OPERATOR: License #:   |                    | API No. 15      |                        |                       |                       |
|--|--------------------|-----------------|------------------------|-----------------------|-----------------------|
| Name:  |                    | If pre 1967     | , supply original comp | oletion date:         |                       |
| Address 1:   |                    | Spot Desci      | ription:               |                       |                       |
| Address 2:   |                    |                 | Sec Tv                 | wp S. R               | East West             |
| City: State:   |                    |                 | Feet from              | North /               | South Line of Section |
| Contact Person:  |                    |                 | Feet from              | East /                | West Line of Section  |
| Phone: ( )   |                    | Footages (      | Calculated from Neare  |                       | n Corner:             |
| Pnone: ( )   |                    |                 | NE NW                  | SE SW                 |                       |
|  |                    |                 |                        |                       |                       |
|  |                    | Lease Nan       | ne:                    | vveii #:              |                       |
| Check One: Oil Well Gas Well OC  | G D&A Ca           | athodic Water S | Supply Well            | Other:                |                       |
| SWD Permit #:  | _ ENHR Permit #: _ |                 |                        | Permit #:             |                       |
| Conductor Casing Size:   | Set at:            | C               | emented with:          |                       | Sacks                 |
| Surface Casing Size:   |                    |                 | emented with:          |                       |                       |
| Production Casing Size:  | Set at:            | C               | emented with:          |                       | Sacks                 |
| List (ALL) Perforations and Bridge Plug Sets:  |                    |                 |                        |                       |                       |
| Condition of Well: Good Poor Junk in Hole Proposed Method of Plugging (attach a separate page if add               |                    | (Interval)      | (                      | Stone Corral Formatio | n)                    |
| Is Well Log attached to this application? Yes N If ACO-1 not filed, explain why:                                   | lo Is ACO-1 filed? | Yes No          |                        |                       |                       |
| Plugging of this Well will be done in accordance with King Company Representative authorized to supervise plugging | •                  | _               |                        |                       | ssion                 |
| Address:   |                    | City:           | State:                 | Zip:                  | +                     |
| Phone: ( )   |                    |                 |                        |                       |                       |
| Plugging Contractor License #:   |                    | Name:           |                        |                       |                       |
| Address 1:   |                    | Address 2:      |                        |                       |                       |
| City:  |                    |                 | State:                 | Zip:                  | +                     |
| Phone: ( )   |                    |                 |                        |                       |                       |
| Proposed Date of Plugging (if known):  |                    |                 |                        |                       |                       |

Payment of the Plugging Fee (K.A.R. 82-3-118) will be guaranteed by Operator or Agent

Submitted Electronically

CEMENTING CO., LLC. 039080

Federal Tax 1 Dc# 20-5975804 SERVICE POINT O BOX H RUSSELL, KANSAS 67665 IOD FINISH ON LOCATION CALLED OUT RANGE Gu Sa LOCATION OF KL WELL # 16- 6 OLD OR NEW (Circle one) OWNER CONTRACTOR TYPE OF JOB Trusca for a CEMENT T.D. HOLE SIZE amount ordered DEPTH CASING SIZE DEPTH Tubing Size DEPTH DRILLPIPE DEPTH TOOL COMMON MINIMUM SHOE JOINT MEAS, LINE CEMENT LEFT IN CSG CHLORIDE. PERFS. ASC 🚣 DISPLACEMENT EQUIDMENT 0 PUMP TRUCK CEMENTER HELPER 423 0.53.6.5 BULK TRUCK # 396 DRIVER BULK TRUCK HANDLING 100 DRIVER MH. EAGR LOGRER SE // MITTE o talaya REMARKS: BRIDE WAS WELL BY THE REAL PROPERTY OF THE SERVICE SERVICE DEPTH OF JOB. PUMPTRUCK CHARGE EXTRA FOOTAGE. 0 @\_ 1158 CHARGE TO MAK .... STREET PLUG & FLOAT EQUIPMENT STATE CITY. 220 The fire of the party of the state of the st To Allied Cementing Co., LLC You are hereby requested to tent comenting equipment and furnish comenter and helper(s) to assist owner or contractor to do work as is listed. The above work was TOTAL ... Commence of the Commence of th done to satisfaction and supervision of owner agent on contractor. I have read and understand the "GENERAL SALES TAX (If Any) -TERMS AND CONDITIONS" listed on the reverse side. TOTAL CHARGES to come the manufacture control of the control of th maker to be that the best might the first the first the first JE RAID IN 30 DAY. and the second of the second of the second of PRINTED NAME The Court of SIGNATURE MEDICAL APPLIANCE AND SERVICE AN The state map through the above the trade of the first first of the state of the st " and the state of the state of

## ALLIED CEMENTING CO., LLC. 044453

Federal Tax I D. a 20-507680

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Mark Parkinson, Governor Thomas E. Wright, Chairman Michael C. Moffet, Commissioner Joseph F. Harkins, Commissioner

January 27, 2010

Operations MAK-J Energy Kansas LLC 1600 N BROADWAY, STE 1740 DENVER, CO 80202

Re: Plugging Application API 15-109-20867-00-00 BH HUCK TRUST 6-6 NW/4 Sec.06-14S-32W Logan County, Kansas

## **Dear Operations:**

This letter is to notify you that the Conservation Division has received your plugging proposal, form CP-1, for the above well and has reviewed the proposal for completeness. The central office will now forward your CP-1 to the district office listed below for review of the proposed plugging method. Please contact the district office for approval of your proposed plugging method at least five (5) days before plugging the well, pursuant to K.A.R. 82-3-113(b). If a workover pit will be used during the plugging of the well it must be permitted. A CDP-1 form must be filed and approved prior to the use of the pit in accordance with K.A.R. 82-3-600.

The Conservation Division's review of form CP-1, either in the central or district office, does not include an inquiry into well ownership or the filing operator's legal right to plug the well. This notice in no way constitutes authorization to plug the above well by persons not having legal rights of ownership or interest in the well.

This notice is void after July 26, 2010. The CP-1 filing does not bring the above well into compliance with K.A.R 82-3-111 with regard to the Commission's temporary abandonment requirements.

Sincerely, Production Department Supervisor

cc: District 4

(785) 625-0550