

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1036307

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. 1        | 5   |              |         |        |      |                                       |  |            |                   |               |                 |
|--|-----------------------------|--------------------|---|--------------|---------|--------|------|---------------------------------------|--|------------|-------------------|---------------|-----------------|
| Name:  |                             |                    | If pre 1967, supply original completion date: |              |         |        |      |                                       |  |            |                   |               |                 |
|  |                             |                    | Spot Description:                             |              |         |        |      |                                       |  |            |                   |               |                 |
|  |                             |                    |   |              |         |        |      | Feet from East / West Line of Section |  |            |                   |               |                 |
|  |                             |                    |   |              |         |        |      | Contact Person:                       |  | - Footages | Calculated from N | learest Outsi | de Section Corn |
|  |                             |                    | Phone: ( )                                    |              | -       | NE NV  | V SE | SW                                    |  |            |                   |               |                 |
|  |                             | -                  |   |              |         |        |      |                                       |  |            |                   |               |                 |
|  |                             | Lease Na           | ame:  |              | Well #: |        |      |                                       |  |            |                   |               |                 |
| Check One: Oil Well Gas Well OG  | D&A Catho                   | dic Wate           | r Supply Well                                 | Other:       |         |        |      |                                       |  |            |                   |               |                 |
| SWD Permit #:  | ENHR Permit #:              |                    | ,   |              | #:      |        |      |                                       |  |            |                   |               |                 |
| Conductor Casing Size:   |                             |                    |   | 0            |         |        |      |                                       |  |            |                   |               |                 |
| Surface Casing Size:   |                             |                    |   | mented with: |         |        |      |                                       |  |            |                   |               |                 |
| Production Casing Size:  |                             |                    |   |              |         |        |      |                                       |  |            |                   |               |                 |
| List (ALL) Perforations and Bridge Plug Sets:  |                             |                    |   |              |         | 000110 |      |                                       |  |            |                   |               |                 |
| Proposed Method of Plugging <i>(attach a separate page if additi</i><br>Is Well Log attached to this application? Yes No<br>If ACO-1 not filed, explain why: |                             | (Interval)<br>s No |   |              |         |        |      |                                       |  |            |                   |               |                 |
| Plugging of this Well will be done in accordance with K.<br>Company Representative authorized to supervise plugging of                                       | operations:                 |                    |   |              |         |        |      |                                       |  |            |                   |               |                 |
| Address:   | City                        | /:                 | State:  | Zip          | :       | _+     |      |                                       |  |            |                   |               |                 |
| Phone: ( )   |                             |                    |   |              |         |        |      |                                       |  |            |                   |               |                 |
| Plugging Contractor License #:   | Na                          | me:                |   |              |         |        |      |                                       |  |            |                   |               |                 |
| Address 1:   | Adc                         | Iress 2:           |   |              |         |        |      |                                       |  |            |                   |               |                 |
| City:  |                             |                    | State:  | Zip          | ):      | _+     |      |                                       |  |            |                   |               |                 |
| Phone: ( )   |                             |                    |   |              |         |        |      |                                       |  |            |                   |               |                 |
| Proposed Date of Plugging (if known):  |                             |                    |   |              |         |        |      |                                       |  |            |                   |               |                 |
| Payment of the Plugging Fee (K.A.R. 82-3-118) will be gu   | aranteed by Operator or Age | nt                 |   |              |         |        |      |                                       |  |            |                   |               |                 |

Submitted Electronically

| Form      | CP1 - Well Plugging Application |
|-----------|---------------------------------|
| Operator  | R & B Oil & Gas, Inc.           |
| Well Name | BURGESS B 1                     |
| Doc ID    | 1036307                         |

Perforations And Bridge Plug Sets

| Perforation Top | Perforation Base | Formation | Bridge Plug Depth |
|-----------------|------------------|-----------|-------------------|
| 4380            | 4390             | Open Hole |                   |



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

March 22, 2010

Randy Newberry R & B Oil & Gas, Inc. 124 N. Main PO BOX 195 ATTICA, KS 67009-9217

Re: Plugging Application API 15-077-20840-00-00 BURGESS B 1 SW/4 Sec.21-31S-08W Harper County, Kansas

Dear Randy Newberry:

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 September 18, 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 2

(316) 630-4000