



This Form must be Typed
Form must be Signed
All blanks must be Filled

WELL PLUGGING APPLICATION

Form KSONA-1, Certification of Compliance with the Kansas Surface Owner Notification Act,
MUST be submitted with this form.

OPERATOR: License #: _____
Name: _____
Address 1: _____
Address 2: _____
City: _____ State: _____ Zip: _____ + _____
Contact Person: _____
Phone: (_____) _____

API No. 15 - _____
If pre 1967, supply original completion date: _____
Spot Description: _____
____ - ____ - ____ Sec. ____ Twp. ____ S. R. ____ East West
____ Feet from North / South Line of Section
____ Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: _____
Lease Name: _____ Well #: _____

Check One: Oil Well Gas Well OG D&A Cathodic Water Supply Well Other: _____
 SWD Permit #: _____ ENHR Permit #: _____ Gas Storage Permit #: _____

Conductor Casing Size: _____ Set at: _____ Cemented with: _____ Sacks
Surface Casing Size: _____ Set at: _____ Cemented with: _____ Sacks
Production Casing Size: _____ Set at: _____ Cemented with: _____ Sacks

List (ALL) Perforations and Bridge Plug Sets:

Elevation: _____ (G.L. / K.B.) T.D.: _____ PBTD: _____ Anhydrite Depth: _____
(Stone Corral Formation)

Condition of Well: Good Poor Junk in Hole Casing Leak at: _____
(Interval)

Proposed Method of Plugging (attach a separate page if additional space is needed):

Is Well Log attached to this application? Yes No Is ACO-1 filed? Yes No

If ACO-1 not filed, 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

Company Representative authorized to supervise plugging operations: _____

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



CERTIFICATION OF COMPLIANCE WITH THE KANSAS SURFACE OWNER NOTIFICATION ACT

This form must be submitted with all Forms C-1 (Notice of Intent to Drill); CB-1 (Cathodic Protection Borehole Intent); T-1 (Request for Change of Operator Transfer of Injection or Surface Pit Permit); and CP-1 (Well Plugging Application). Any such form submitted without an accompanying Form KSONA-1 will be returned.

Select the corresponding form being filed: C-1 (Intent) CB-1 (Cathodic Protection Borehole Intent) T-1 (Transfer) CP-1 (Plugging Application)

OPERATOR: License # _____
Name: _____
Address 1: _____
Address 2: _____
City: _____ State: _____ Zip: _____ + _____
Contact Person: _____
Phone: (_____) _____ Fax: (_____) _____
Email Address: _____

Well Location:
____ - ____ - ____ - ____ Sec. ____ Twp. ____ S. R. ____ East West
County: _____
Lease Name: _____ Well #: _____

If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:

Surface Owner Information:

Name: _____
Address 1: _____
Address 2: _____
City: _____ State: _____ Zip: _____ + _____

When filing a Form T-1 involving multiple surface owners, attach an additional sheet listing all of the information to the left for each surface owner. Surface owner information can be found in the records of the register of deeds for the county, and in the real estate property tax records of the county treasurer.

If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.

Select one of the following:

- I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address.
- I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.

If choosing the second option, submit payment of the \$30.00 handling fee with this form. If the fee is not received with this form, the KSONA-1 form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be returned.

I Submitted Electronically

I

Form	CP1 - Well Plugging Application
Operator	Vincent Oil Corporation
Well Name	UNRUH 1-2
Doc ID	1056107

Perforations And Bridge Plug Sets

Perforation Top	Perforation Base	Formation	Bridge Plug Depth
4792	4798	Viola	

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 5004
Name: Vincent Oil Corporation
Address: 125 N. Market, Suite 1075
City/State/Zip: Wichita, Kansas 67202
Purchaser: Oneok Midstream Gas Supply, LLC
Operator Contact Person: Rick Hiebsch
Phone: (316) 262-3573
Contractor: Name: Mallard J.V., LLC
License: 4958
Wellsite Geologist: Ken LeBlanc

Designate Type of Completion:

New Well Re-Entry Workover
 Oil SWD SLOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Re-entry: Old Well Info as follows:

Operator: _____
Well Name: _____
Original Comp. Date: _____ Original Total Depth: _____
 Deepening Re-perf. Conv. to Enhr./SWD
 Plug Back _____ Plug Back Total Depth _____
 Commingled _____ Docket No. _____
 Dual Completion _____ Docket No. _____
 Other (SWD or Enhr.?) _____ Docket No. _____

<u>9-21-01</u>	<u>10-01-01</u>	<u>10-22-01</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 097-21475-0000
County: Kiowa
SE-NE-SW Sec. 2 Twp. 28 S. R. 18 East West
1650 feet from (S) / N (circle one) Line of Section
2310 feet from E / (W) (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW
Lease Name: Unruh Well #: 1-2

Field Name: Allstot
Producing Formation: Viola

Elevation: Ground: 2192 Kelly Bushing: 2197
Total Depth: 4840 Plug Back Total Depth: 4813

Amount of Surface Pipe Set and Cemented at 415 Feet
Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from _____
feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content 4000 ppm Fluid volume 160 bbls
Dewatering method used sucked up & hauled off free fluids

Location of fluid disposal if hauled offsite:

Operator Name: Advantage Resources

Lease Name: Hardy B #1 License No.: 6927

Quarter NE Sec. 24 Twp. 28 S. R. 18 East West

County: Kiowa Docket No.: D27161

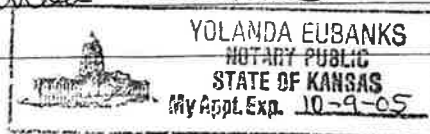
INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form (see rule 82-3-107 for confidentiality in excess of 12 months). One copy of all wireline logs and geologist well report shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Signature: Richard A. Hiebsch
Richard A. Hiebsch
Title: President Date: 1-16-02

Subscribed and sworn to before me this 16th day of January,
2002

Notary Public: Yolanda Eubanks
Date Commission Expires: _____



KCC Office Use ONLY

Letter of Confidentiality Attached
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

Operator Name: Vincent Oil Corporation Lease Name: Unruh Well #: 1-2
 Sec. 2 Twp. 28 S. R. 18 East West County: Kiowa

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface test, along with final chart(s). Attach extra sheet if more space is needed. Attach copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: Compensated Neutron/Density, Dual Induction, Sonic, Dual Receiver Bond	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name (see attached) Top Datum
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CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
Surface	12 1/4 in.	8 5/8 in.	23	415	60/40 poz	225	6% gel, 3% cc
Production	7 7/8 in.	4 1/2 in	10.5	4839	ASE	150	5# Cole-seal/ sx

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	
			Depth
4	4792 to 4798 ft.	750 gals. 7.5% HCL w/ 150 gals. methanol	4792 to
		12,500 gals. of gelled water & 10,000 lbs.	4798 ft
		20/40 sand & 7000 lbs. 12/20 sand.	

TUBING RECORD		Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		2 3/8 in.	4809 ft.	N/A		
Date of First, Resumed Production, SWD or Enhr.			Producing Method			
1-2-2002			<input checked="" type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)			
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity	
	0	300	20			

Disposition of Gas **METHOD OF COMPLETION** Production Interval

Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled
(If vented, Sumit ACO-1B.) Other (Specify) _____

UNRUH 1-2
COMPLETION INFORMATION

C SE NE SW¼
Sec. 2-28S-18W
Kiowa County, KS

Vincent Oil Corporation
Greensburg Prospect

- 10-15-01 Moved in and rigged up Plains, Inc. double drum. SDFN.
- 10-16-01 ELI Wireline Services perforated Kinderhook sand from 4792 to 4798 feet with 32 gram expendable hollow steel carrier at 4 SPF. Started to run packer and tubing and rig engine broke down. Unit down for repairs rest of the day. SDFN.
- 10-17-01 Finished running packer and tubing and set packer at 4780 ft. Rigged up Acid Services and treated perforations with 750 gals. of 7.5% HCL Acid with 150 gals. Methanol. Finally started feeding at 2500 psi with initial rate of 2 BPM @ 1000 psi. Gradually increased rate to finish treatment at 3½ BPM @ 1500 psi. Initial shut-in was 450 psi. Rigged up to swab recovering 16.75 bbls. of 41.5 bbl load. Released and reset packer. Swabbed 10 more bbls. with light gas blow. SDFN.
- 10-18-01 SITP 1000 psi. Blew gas and heavy mist to pit. Well died in 5 min. Ran in with swab and recovered ¾ bbl. fluid with slight gas blow estimated at 10 to 15 MCFD rate. Shut well in waiting on frac job. SITP built to 900 psi. Rigged up Acid Services and fracture treated Kinderhook Sand with 12,500 gals. of gelled water and 10,000 lbs. 20/40 Ottawa sand and 7000 lbs. of 12/20 Brady sand. Treated at 7.5 BPM at average 2000 psi. SDFN.
- 10-19-01 Tubing on vacuum. Released packer and tagged sand at 4781 ft with top of perforations at 4792 ft. Pulled tubing and packer. Sand pumped frac sand most of the day cleaning out casing to bottom. SDFN.
- 10-20-01 Casing on vacuum. Ran in with tubing and mud anchor and set at 4809 feet, 4 feet off bottom. Swabbed continuously recovering 45 bbls. Well kicked off and began flowing recovering estimated 20 to 25 bbls of fluid by 6:00 p.m. Casing and tubing pressure slowly climbing while flowing well at maximum rate through 2 in. orbit valve. Well appears "very strong". SDFN.
- 10-22-01 SICP 1350 psi. SITP 1175 psi. Flowed well for 30 min. recovering 6.68 bbls. water and condensate/oil. Fluid decreased to mist with very strong gas blow. Rigged down and released unit. Will move gas pac and water tank and test to establish gas and fluid potential.

Conservation Division
Finney State Office Building
130 S. Market, Rm. 2078
Wichita, KS 67202-3802



phone: 316-337-6200
fax: 316-337-6211
<http://kcc.ks.gov/>

Thomas E. Wright, Chairman
Ward Loyd, Commissioner

Corporation Commission

Sam Brownback, Governor

May 18, 2011

M.L. Korphage
Vincent Oil Corporation
155 N MARKET STE 700
WICHITA, KS 67202-1821

Re: Plugging Application
API 15-097-21475-00-00
UNRUH 1-2
SW/4 Sec.02-28S-18W
Kiowa County, Kansas

Dear M.L. Korphage:

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 November 14, 2011. 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 1

(620) 225-8888