

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1063341

Form CP-1 March 2010 This Form must be Typed Form must be Signed All blanks must be Filled

	WELL PLUGGING APPLICATION	
m KEONA 1	Cartification of Compliance with the Kanage Surface Owner Natification Ac	*

OPERATOR: License #:		_ API No. 15			
Name:					
Address 1:		—   · · ·	Spot Description:		
Address 2:					
City: State: _	Zip: +		South Line of Section		
Contact Person:			Nest Line of Section		
Phone: ( )		Footages Calculated from Nearest Outside Section	Corner:		
		County: Vell #:			
Check One: Oil Well Gas Well	OG D&A Cat	thodic Water Supply Well Other:			
SWD Permit #:	ENHR Permit #:				
Conductor Casing Size:					
Surface Casing Size:					
-		Cemented with:			
List (ALL) Perforations and Bridge Plug Sets:	00141				
Condition of Well: Good Poor Junk i Proposed Method of Plugging <i>(attach a separate page</i>	in Hole Casing Leak at:	(Stone Corral Formation	,		
Is Well Log attached to this application?	No Is ACO-1 filed?	Yes 🗌 No			
Is Well Log attached to this application? Yes	No Is ACO-1 filed?	Yes 🗌 No			
· · _	No Is ACO-1 filed?	Yes 🗌 No			
If ACO-1 not filed, explain why: Plugging of this Well will be done in accordance		Rules and Regulations of the State Corporation Commis			
If ACO-1 not filed, explain why: Plugging of this Well will be done in accordance					
If ACO-1 not filed, explain why: Plugging of this Well will be done in accordance of Company Representative authorized to supervise plu	with K.S.A. 55-101 <u>et. seq</u> . and the	Rules and Regulations of the State Corporation Commis			
If ACO-1 not filed, explain why: Plugging of this Well will be done in accordance Company Representative authorized to supervise plu	with K.S.A. 55-101 <u>et. seq</u> . and the ugging operations:	Rules and Regulations of the State Corporation Commiss			
If ACO-1 not filed, explain why: Plugging of this Well will be done in accordance of Company Representative authorized to supervise plu Address: Phone: ( )	with K.S.A. 55-101 <u>et. seq</u> . and the ugging operations: (	Rules and Regulations of the State Corporation Commiss			
If ACO-1 not filed, explain why:         Plugging of this Well will be done in accordance of Company Representative authorized to supervise plue Address:         Address:         Phone:       )         Plugging Contractor License #:	with K.S.A. 55-101 <u>et. seq</u> . and the ugging operations: (	Rules and Regulations of the State Corporation Commiss         Dity:			
If ACO-1 not filed, explain why:         Plugging of this Well will be done in accordance of Company Representative authorized to supervise plue         Address:         Phone:	with K.S.A. 55-101 et. seq. and the         ugging operations:	Rules and Regulations of the State Corporation Commiss         Dity:	+		
If ACO-1 not filed, explain why:         Plugging of this Well will be done in accordance of Company Representative authorized to supervise plue         Address:         Phone:	with K.S.A. 55-101 et. seq. and the         ugging operations:	Rules and Regulations of the State Corporation Commiss         City:	+		

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

Submitted Electronically



KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

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## CERTIFICATION OF COMPLIANCE WITH THE KANSAS SURFACE OWNER NOTIFICATION ACT

Form KSONA-1 July 2010 Form Must Be Typed Form must be Signed All blanks must be Filled

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 #	Well Location:		
Name:			
Address 1:	County:		
Address 2:	Lease Name: Well #:		
City:          Zip:        +            Contact Person:	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:		
Phone: ( ) Fax: ( )			
Email Address:			
Surface Owner Information:			
Name:	When filing a Form T-1 involving multiple surface owners, attach an additional		
Address 1:	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.		
Address 2:			
City: State: Zip:+			

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.

## Submitted Electronically

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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/

Mark Sievers, Chairman Ward Loyd, Commissioner Thomas E. Wright, Commissioner Sam Brownback, Governor

September 14, 2011

Derek Rhodes Rhodes, Derek Leon dba Rhodes Well Service 4990 WISCONSIN RD BRONSON, KS 66716

Re: Plugging Application API 15-001-03140-00-00 Melvin Stewart 1 33 NE/4 Sec.22-23S-21E Allen County, Kansas

Dear Derek Rhodes :

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 March 12, 2012. 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 3

(620) 432-2300