



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

Form	CP1 - Well Plugging Application
Operator	Vess Oil Corporation
Well Name	Pierpoint A 110
Doc ID	1067174

Perforations And Bridge Plug Sets

Perforation Top	Perforation Base	Formation	Bridge Plug Depth
600	615	Admire	



# Data Induction Focused Log

1710000000

FILE NO.	COMPANY CITIES SERVICE OIL COMPANY		
	WELL PIERPOINT A NO.110		
	FIELD EL DORADO		
	COUNTY BUTLER	STATE KANSAS	
LOCATION:		Other Services	
50'FWL 660'FNL		CDLC GR	
SEC 33	TWP 25S	RGE 5E	

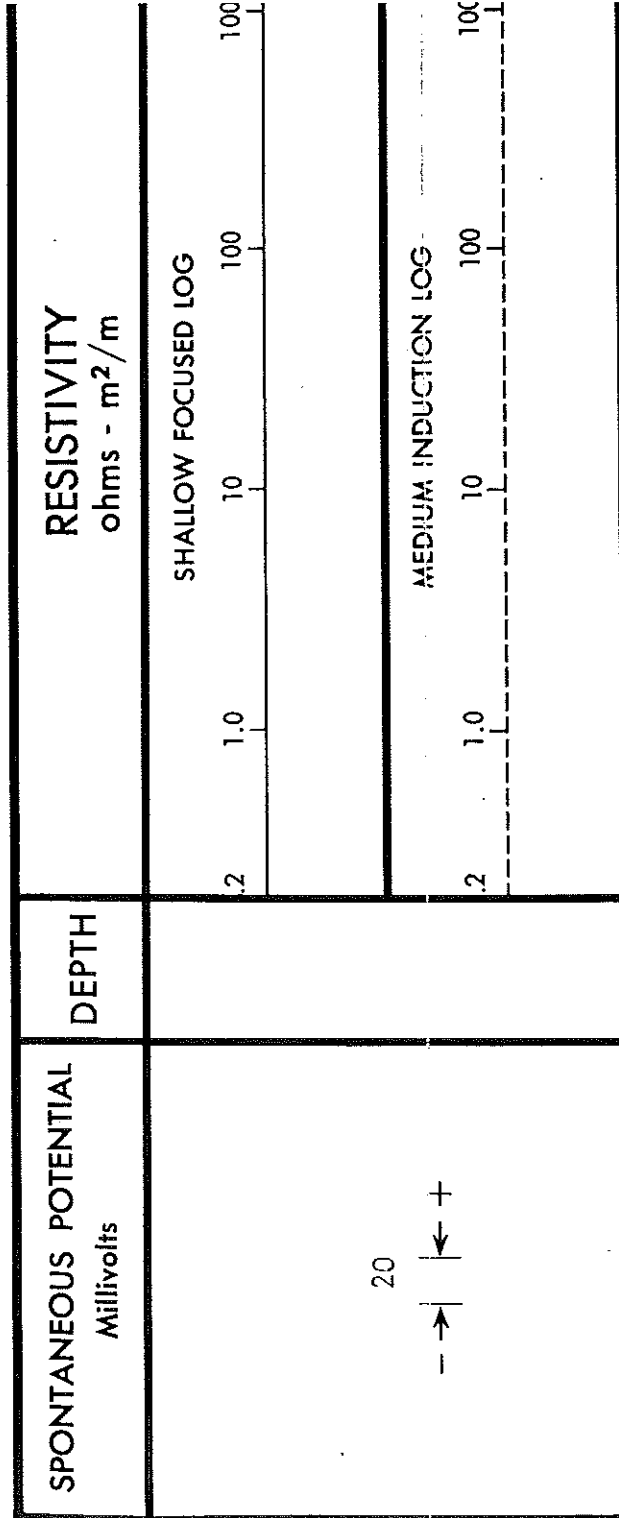
Permanent Datum	G.L.	Elev.	1367	KB	1372
Log Measured from	K.B.	5	Ft. Above Permanent Datum	DF	----
Drilling Measured from	K.B.			GL	1367

Date	1/10/78				
Run No.	ONE				
Depth—Driller	2150				
Depth—Logger	2146				
Bottom Logged Interval	2144				
Top Logged Interval	234				
Casing—Driller	8-5/8"	@ 243	@	@	@
Casing—Logger	234				
Bit Size	7-7/8				
Type Fluid in Hole	CHEM GEL				
Density and Viscosity	9.7	46			
pH and Fluid Loss	12.0	22.4pc	cc	cc	cc
Source of Sample	FLOWLINE				
Rm @ Meas. Temp.	.82 @ 71 °F	@ °F	@ °F	@ °F	@ °F
Rmf @ Meas. Temp.	.66 @ 71 °F	@ °F	@ °F	@ °F	@ °F
Rmc @ Meas. Temp.	.93 @ 71 °F	@ °F	@ °F	@ °F	@ °F
Source of Rmf and Rmc	M	M			
Rm @ BHT	.58 @ 100°F	@ °F	@ °F	@ °F	@ °F
Time Since Circ.	12.5 HOURS				
Max. Rec. Temp. Deg. F.	100°F		°F	°F	°F
Equip. No. and Location	ML4060 PERRY				
Recorded By	WOODS				
Witnessed By	MR. EHRLICH				

THIS HEADING AND LOG CONFORMS TO API RECOMMENDED STANDARD PRACTICE RP-31

REMARKS	EQUIPMENT USED					
	Series No.	1502				
	Run No.	ONE				
	S.O.	90382				
	Tool No.	30351				
	Elec. No.	30351				
	Panel No.	34815				
	C. S.	160				

Changes in Mud Type or Additional Samples		Type Log		Scale Changes	
		Depth	Scale Up Hole	Scale Down Ho	
Date	Sample No.				
Depth-Driller					
Type Fluid in Hole					
Dens.	Visc.				
pH	Fluid Loss	cc			
Source of Sample					
Rm @ Meas. Temp.	°F	@	°F	Run No.	ONE
Rmf @ Meas. Temp.	°F	@	°F	Tool Type	1503 DIFL
Rmc @ Meas. Temp.	°F	@	°F	Pad Type	--
Source Rmf Rmc				Tool Position	1.5" S.O.
Rm @ BHT	°F	@	°F	Other	----
Rmf @ BHT	°F	@	°F		
Rmc @ BHT	°F	@	°F		



SPONTANEOUS POTENTIAL

Millivolts

DEPTH

RESISTIVITY

ohms - m<sup>2</sup>/m

20  
- - -> | |< - - - +

SHALLOW FOCUSED LOG

1.0 10 100 1000

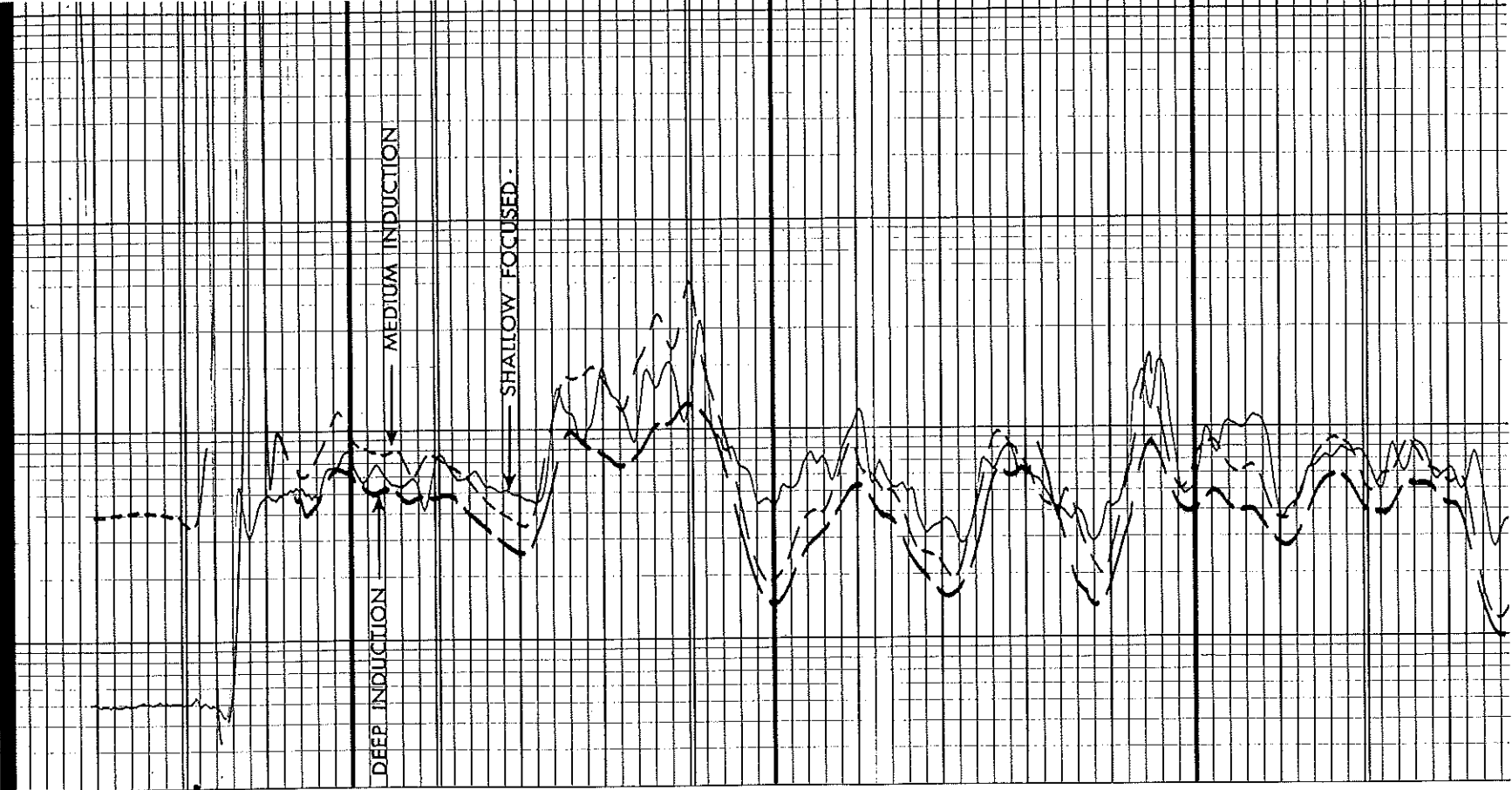
MEDIUM INDUCTION LOG

1.0 10 100 1000

DEEP INDUCTION LOG

1.0 10 100 1000

5" = 100'



CSG

0300

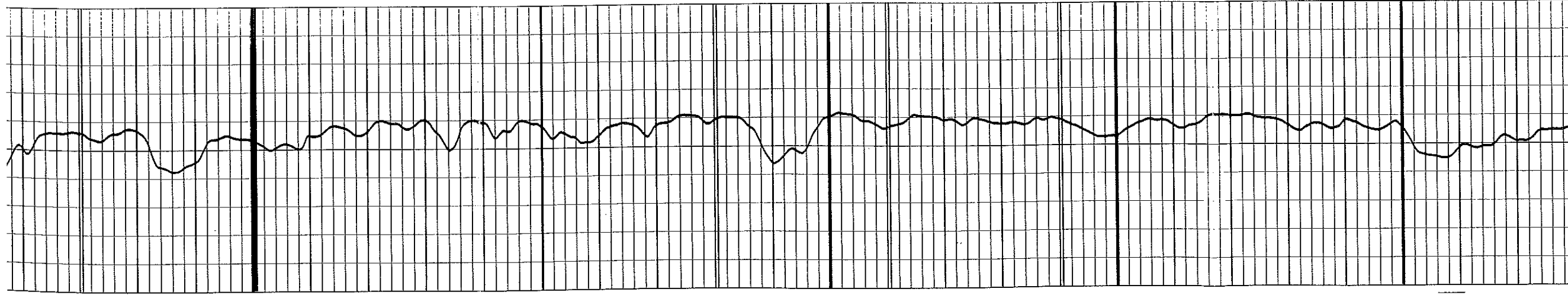


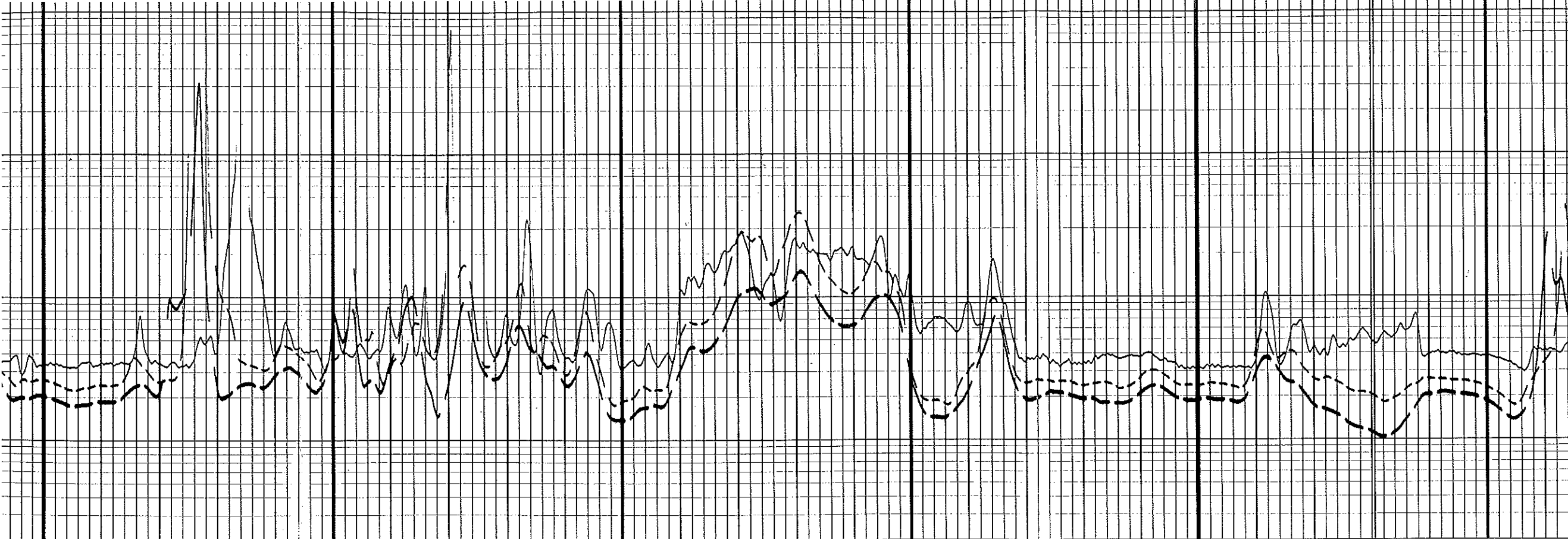
0400

0500

0600

602  
610  
616

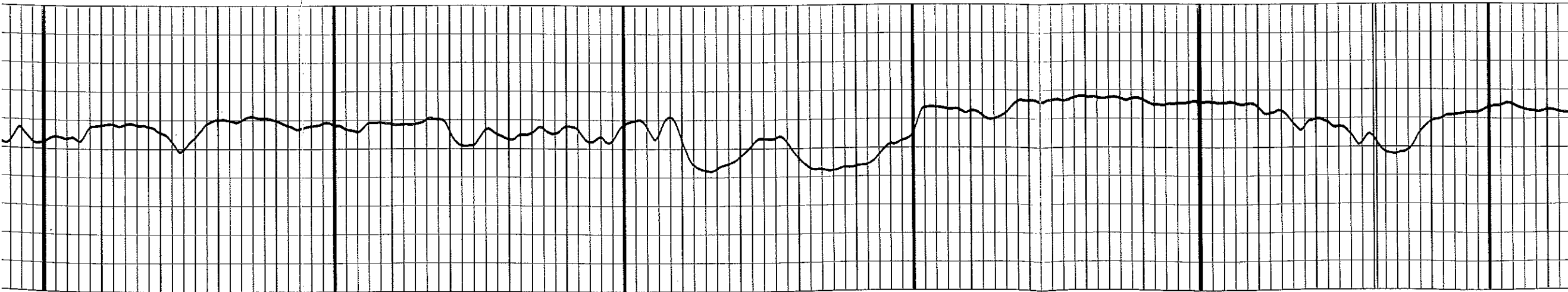




0700

0800

0900



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

November 09, 2011

Casey Coats  
Vess Oil Corporation  
1700 WATERFRONT PKWY BLDG 500  
WICHITA, KS 67206-6619

Re: Plugging Application  
API 15-015-21010-00-01  
Pierpoint A 110  
NW/4 Sec.33-25S-05E  
Butler County, Kansas

Dear Casey Coats:

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 May 07, 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 2

(316) 630-4000