



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	Vess Oil Corporation
Well Name	BURLINGAME STOKES 75
Doc ID	1067175

Perforations And Bridge Plug Sets

Perforation Top	Perforation Base	Formation	Bridge Plug Depth
623	635	Admire	



# Dual Induction Focused Log

FILE NO. \_\_\_\_\_

COMPANY CITIES SERVICE OIL COMPANY

WELL B. STOKES NO.75

FIELD ELDORADO

COUNTY BUTLER STATE KANSAS

LOCATION: 660' FSL 2590' FWL Other Services CDL C GR

SEC 28 TWP 25S RGE 5E

Permanent Datum G.L. Elev. 1378 KB 1383

Log Measured from K.B. 5 Ft. Above Permanent Datum DF -----

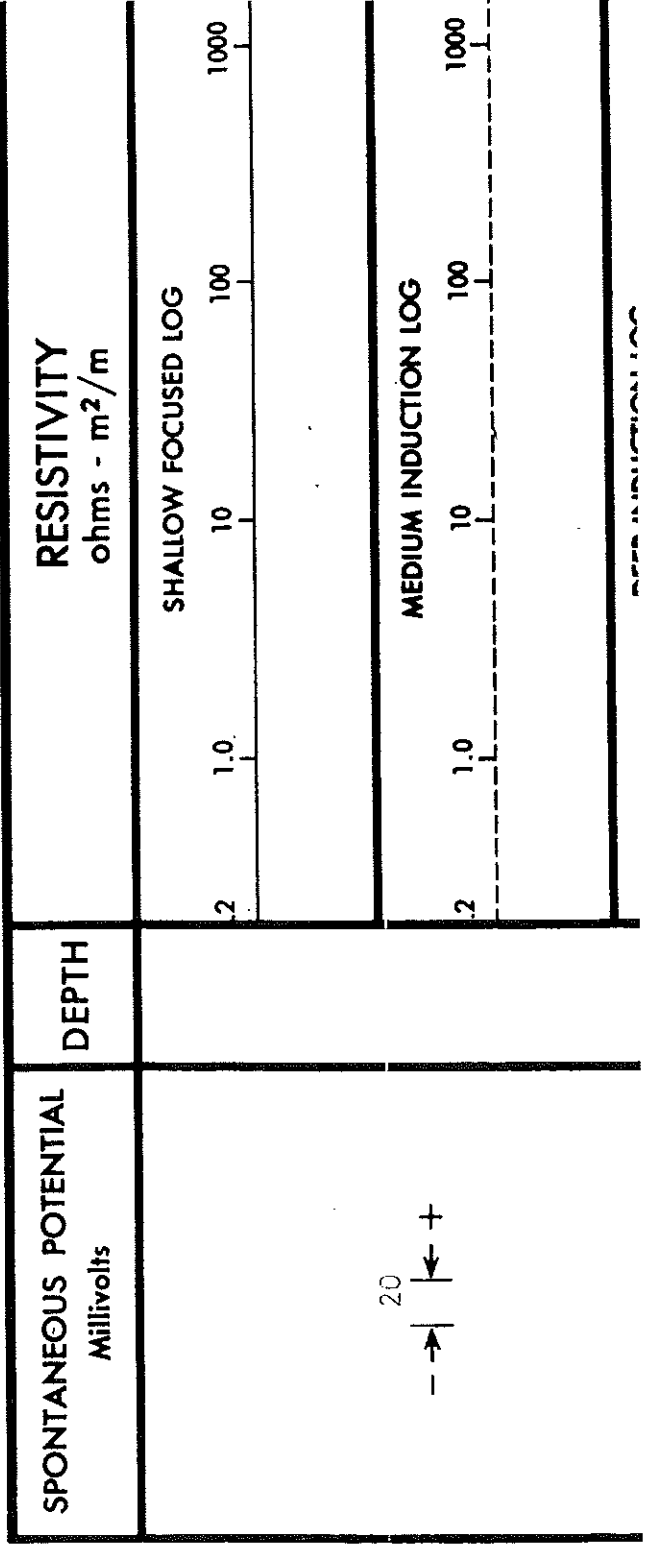
Drilling Measured from K.B. GL 1378

Date	<u>8/11/77</u>				
Run No.	<u>ONE</u>				
Depth—Driller	<u>2150</u>				
Depth—Logger	<u>2145</u>				
Bottom Logged Interval	<u>2147</u>				
Top Logged Interval	<u>229</u>				
Casing—Driller	<u>8-5/8" @ 231</u>	<u>@</u>	<u>@</u>	<u>@</u>	<u>@</u>
Casing—Logger	<u>229</u>				
Bit Size	<u>7-7/8</u>				
Type Fluid in Hole	<u>CHEM</u>				
Density and Viscosity	<u>---</u>	<u>---</u>			
pH and Fluid Loss	<u>---</u>	<u>---</u>	<u>cc</u>	<u>cc</u>	<u>cc</u>
Source of Sample	<u>FLOWLINE</u>				
Rm @ Meas. Temp.	<u>1.62 @ 65 °F</u>	<u>@</u>	<u>°F</u>	<u>@</u>	<u>°F</u>
Rmf @ Meas. Temp.	<u>1.31 @ 65 °F</u>	<u>@</u>	<u>°F</u>	<u>@</u>	<u>°F</u>
Rmc @ Meas. Temp.	<u>1.82 @ 65 °F</u>	<u>@</u>	<u>°F</u>	<u>@</u>	<u>°F</u>
Source of Rmf and Rmc	<u>M</u>   <u>M</u>				
Rm @ BHT	<u>1.13 @ 93 °F</u>	<u>@</u>	<u>°F</u>	<u>@</u>	<u>°F</u>
Time Since Circ.	<u>1.0 HOUR</u>				
Max. Rec. Temp. Deg. F.	<u>93 °F</u>	<u>°F</u>	<u>°F</u>	<u>°F</u>	<u>°F</u>
Equip. No. and Location	<u>ML4060 PERRY</u>				
Recorded By	<u>WALTON</u>				
Witnessed By	<u>MR. EHRLICH</u>				

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

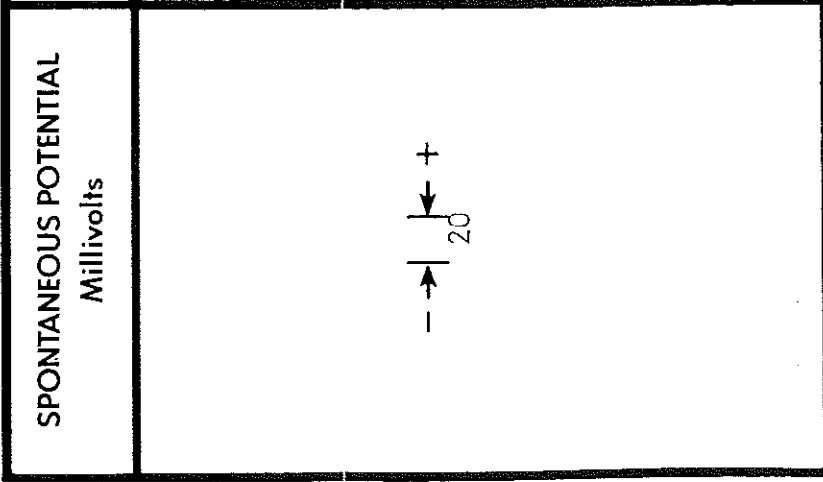
REMARKS	Series No.	<u>1503</u>
	Run No.	<u>ONE</u>
	S.O.	<u>78667</u>
	Tool No.	<u>33308</u>
	Elec. No.	<u>33308</u>
	Panel No.	<u>34815</u>
C.S.	<u>160</u>	

Changes in Mud Type or Additional Samples		Scale Changes	
Date	Sample No.	Date	Scale Up Hole
Depth-Driller			Scale Down Hole
Type Fluid in Hole			
Dens.	Visc.		
pH	Fluid Loss		
Source of Sample			
Rm @ Meas. Temp.	<u>@ °F</u>	Run No.	<u>ONE</u>
Rmf @ Meas. Temp.	<u>@ °F</u>	Tool Type	<u>DIFL-1503</u>
Rmc @ Meas. Temp.	<u>@ °F</u>	Pad Type	<u>---</u>
Source Rmf Rmc		Tool Position	<u>1-1/2" S.O.</u>
Rm @ BHT	<u>@ °F</u>	Other	<u>---</u>
Rmf @ BHT	<u>@ °F</u>		
Rmc @ BHT	<u>@ °F</u>		

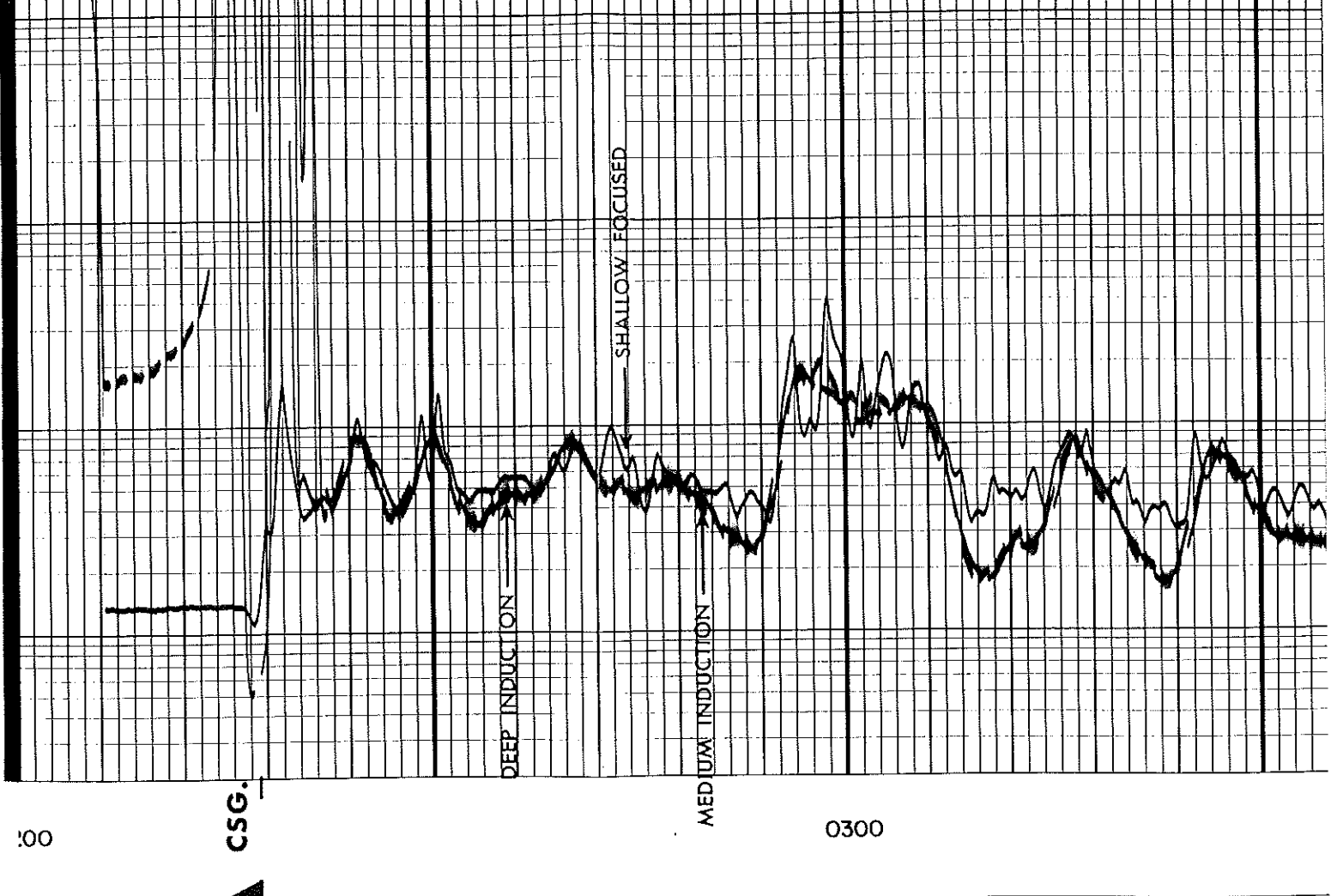
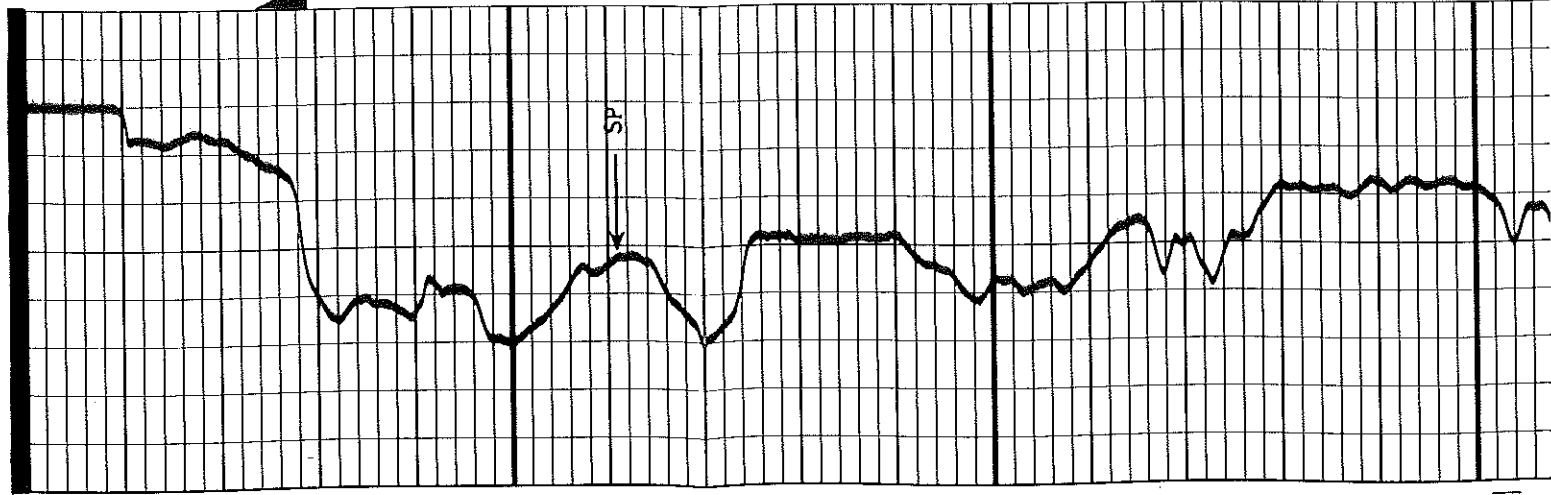
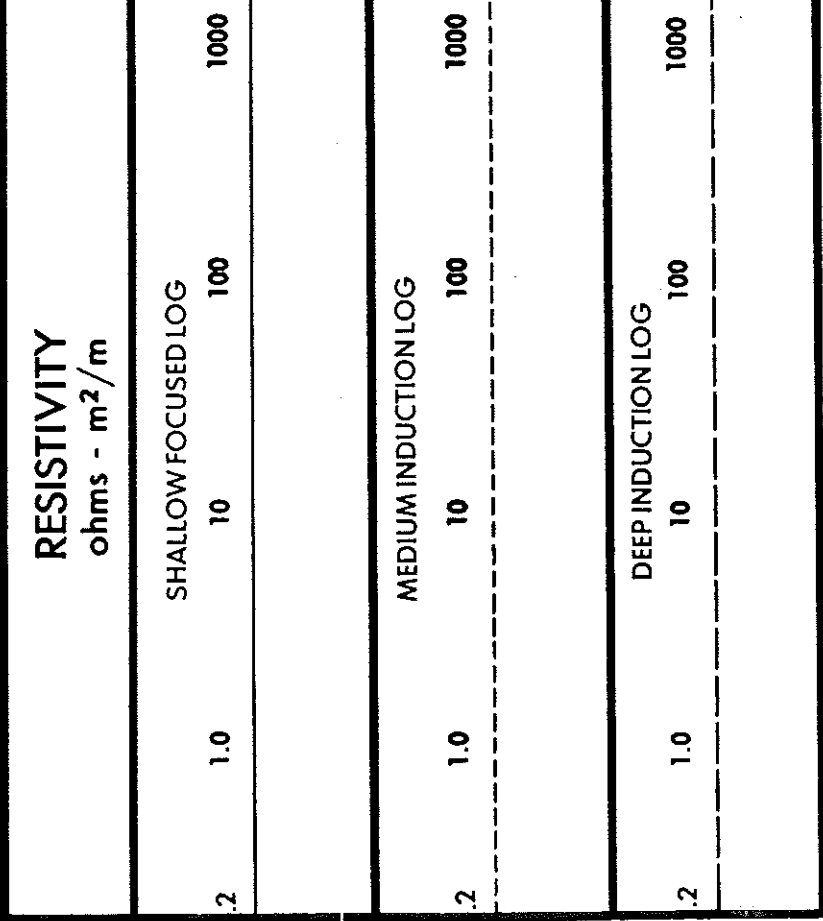


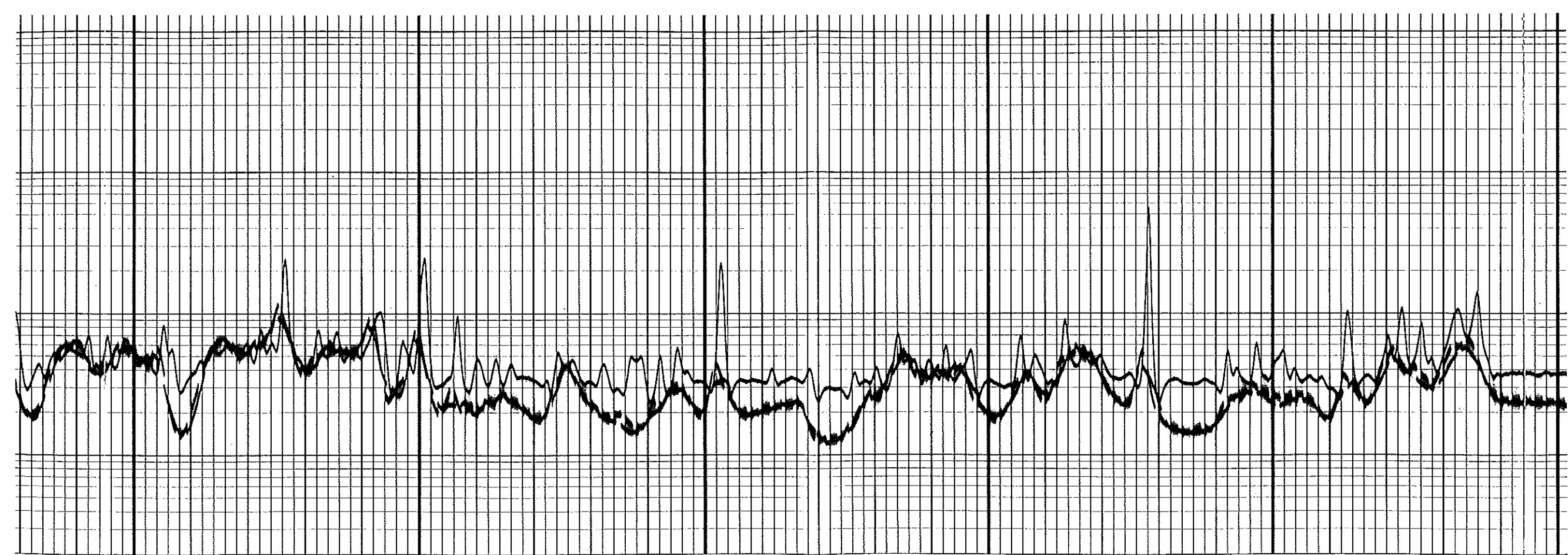
Well B. STOKES NO. 15  
 Field ELDORADO  
 County BUTLER  
 State KANSAS

Log R.K. 4142  
 Log T.D. 2147  
 Elevations:  
 K.B. 1383 D.F. ---- G.L. 1378



DEPTH

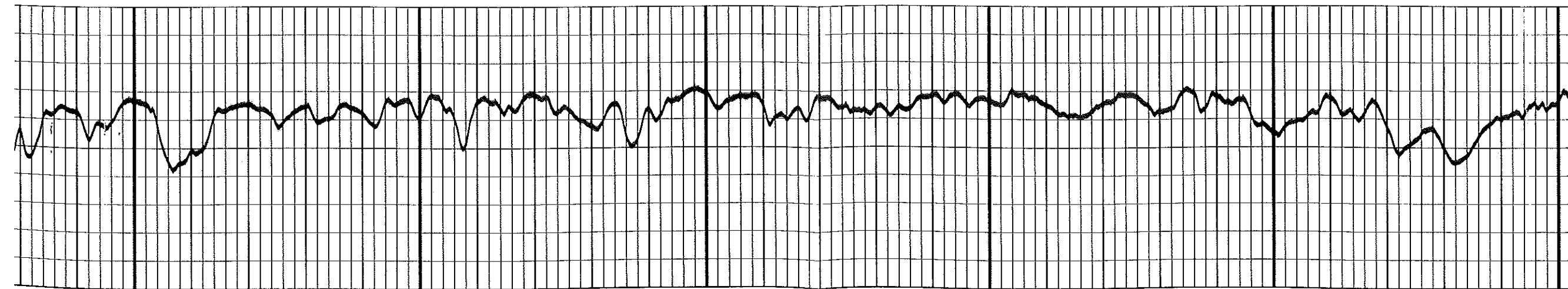


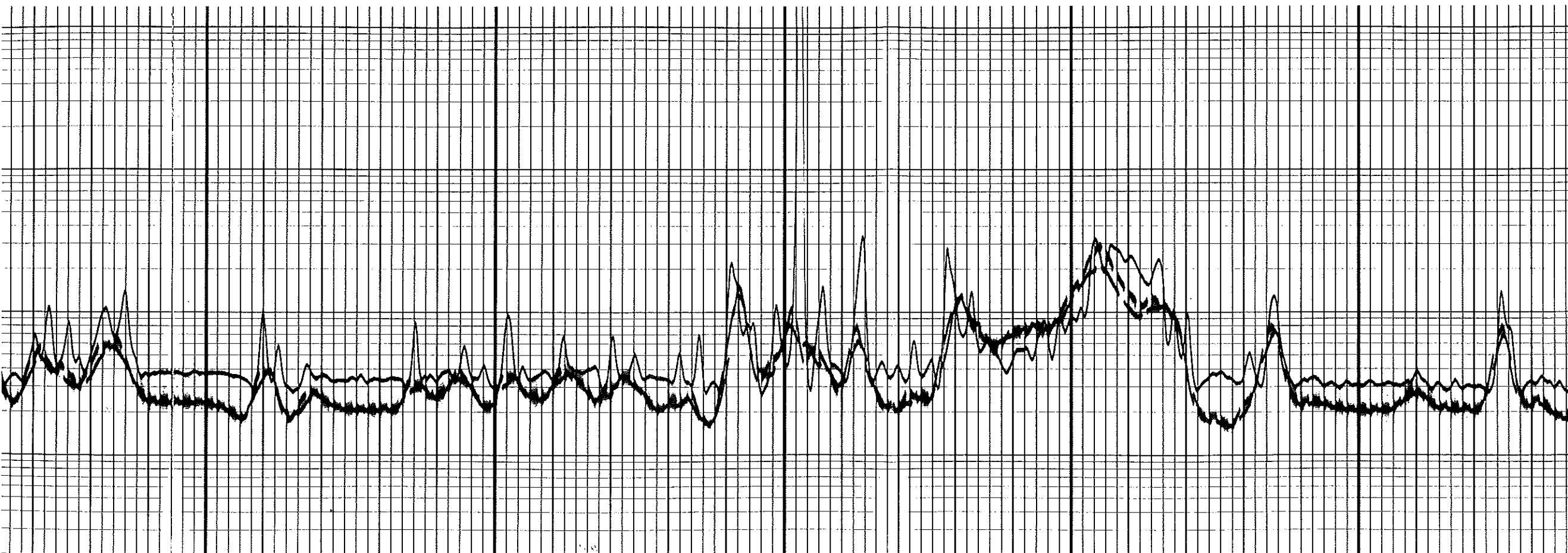


0400

0500

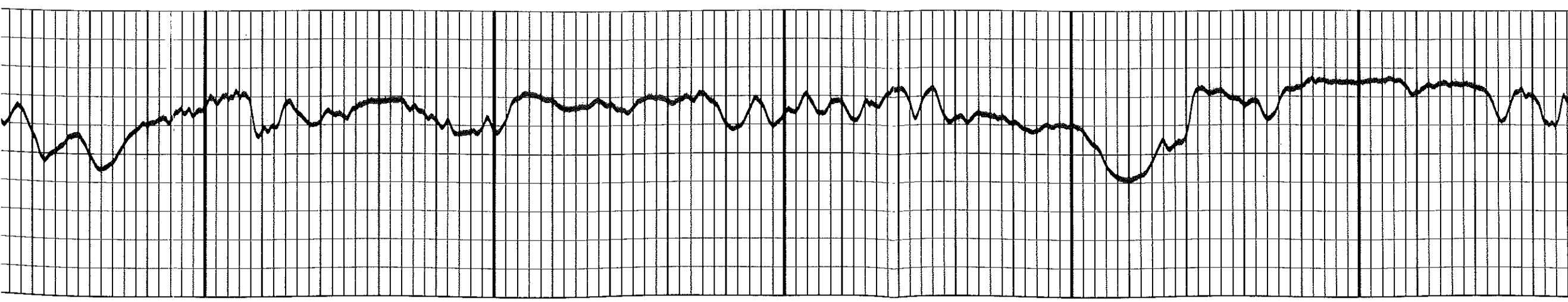
0600





0700

0800



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 15-015-20965-00-01  
BURLINGAME STOKES 75  
SW/4 Sec.28-25S-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