



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	Apollo Energies, Inc.
Well Name	INEZ BEAN 2-4
Doc ID	1073307

Perforations And Bridge Plug Sets

Perforation Top	Perforation Base	Formation	Bridge Plug Depth
4768	4774	lansing	
5298	5310	mississippi	5280



Sonic Cement
Bond Log

Ph. (785) 625-3858

File No.

Company R.J. PATRICK OPERATING COMPANY
Well INEZ BEAN #2-4
Field
County COMANCHE State KANSAS

Location NW NW NE
Sec: 4 Twp: 32S Rge: 19W
Other Services PERFORATE

Permanent Datum	Ground Level	Elevation 2138	K.B. 2149 D.F. G.L. 2138
Log Measured From	Kelly Bushing	11 Ft. Above Perm. Datum	
Drilling Measured From	Kelly Bushing		
Run Number	ONE		
Date Survey	JULY 2, 2001		
Date Cementing	////		
Type Cementing Operation	PRIMARY		
Depth Driller	5373		
Depth Logger	5325		
Logged Interval	5322 to 4300		
Casing Driller	4 1/2" @ T.D.		
Float Collar -- D.V. Tool	////		
Squeeze Depth	////		
Amount & Type Cement	250 sks POZ.MIX		
Amount & Type Admix	75% CFR2 18% SALT 4# FLOSEAL		
Type Fluid In Hole	WATER		
Fluid Level	FULL		
Salinity PPM CL	////		
Weight lb/gal -- Vis.	////		
Approx. Logged Cement Top	4570		
Calculated Cement Top	4550		
Max. Hole Temperature	132		
Tool No.	10		
Spacing Recorded	3'		
Equipment -- Location	5 PRATT, KS.		
Recorded By	K. SCHMEIDLER		
Witnessed By	R.J. PATRICK		

LOG-TECH

<<< Fold Here >>>

All interpretations are opinions based on inferences from electrical or other measurements and we cannot and do not guarantee the accuracy or correctness of any interpretation, and we shall not, except in the case of gross or willful negligence on our part, be liable or responsible for any loss, costs, damages, or expenses incurred or sustained by anyone resulting from any interpretation made by any of our officers, agents or employees. These interpretations are also subject to our general terms and conditions set out in our current Price Schedule.

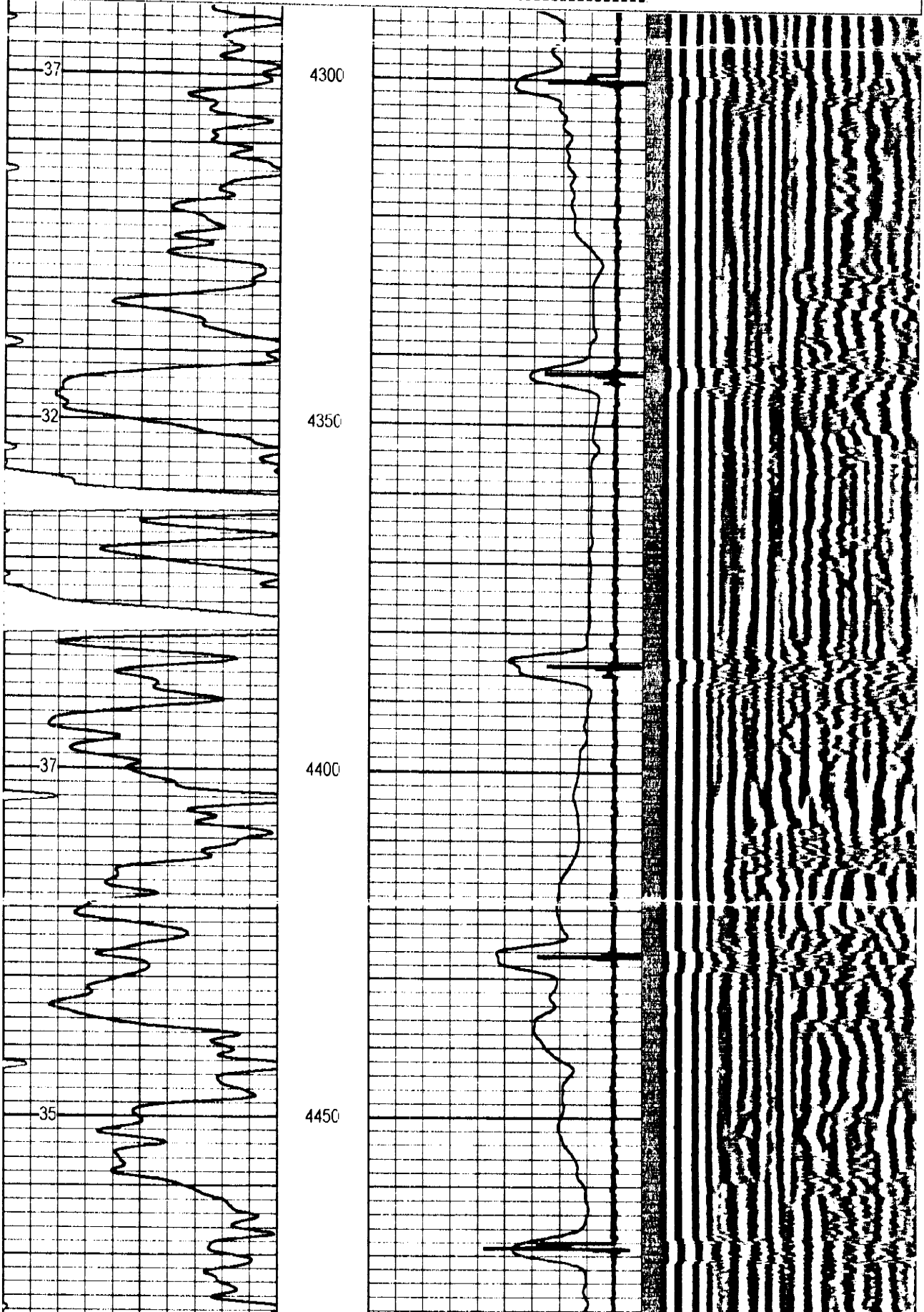
Comments

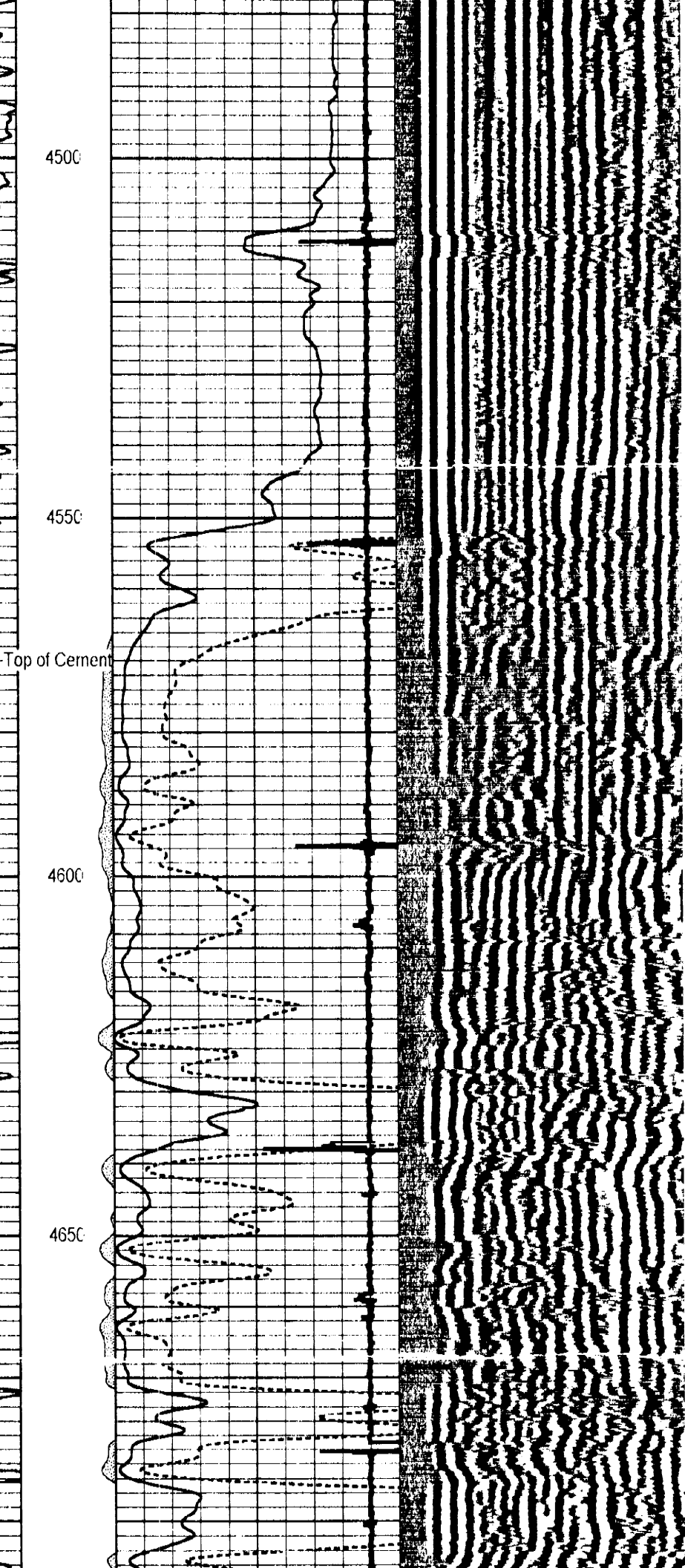
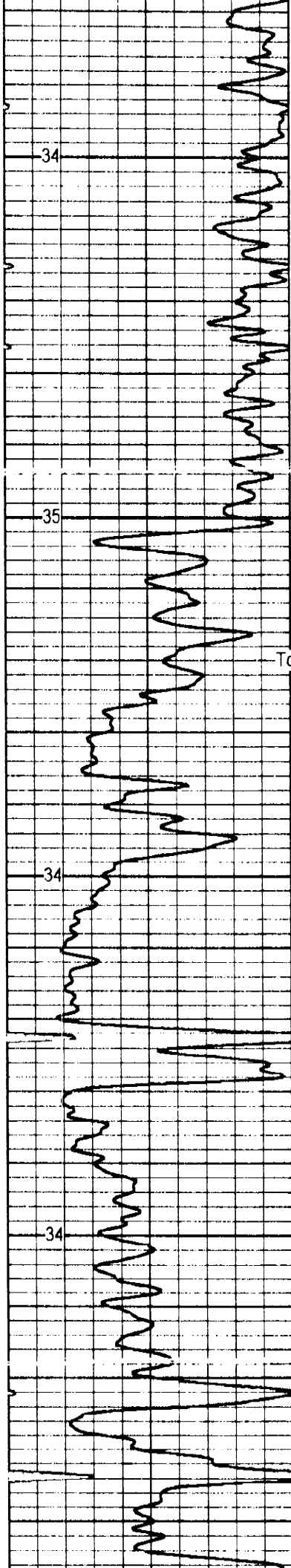
Thank you for using Log-Tech, Inc.
(785) 625-3858

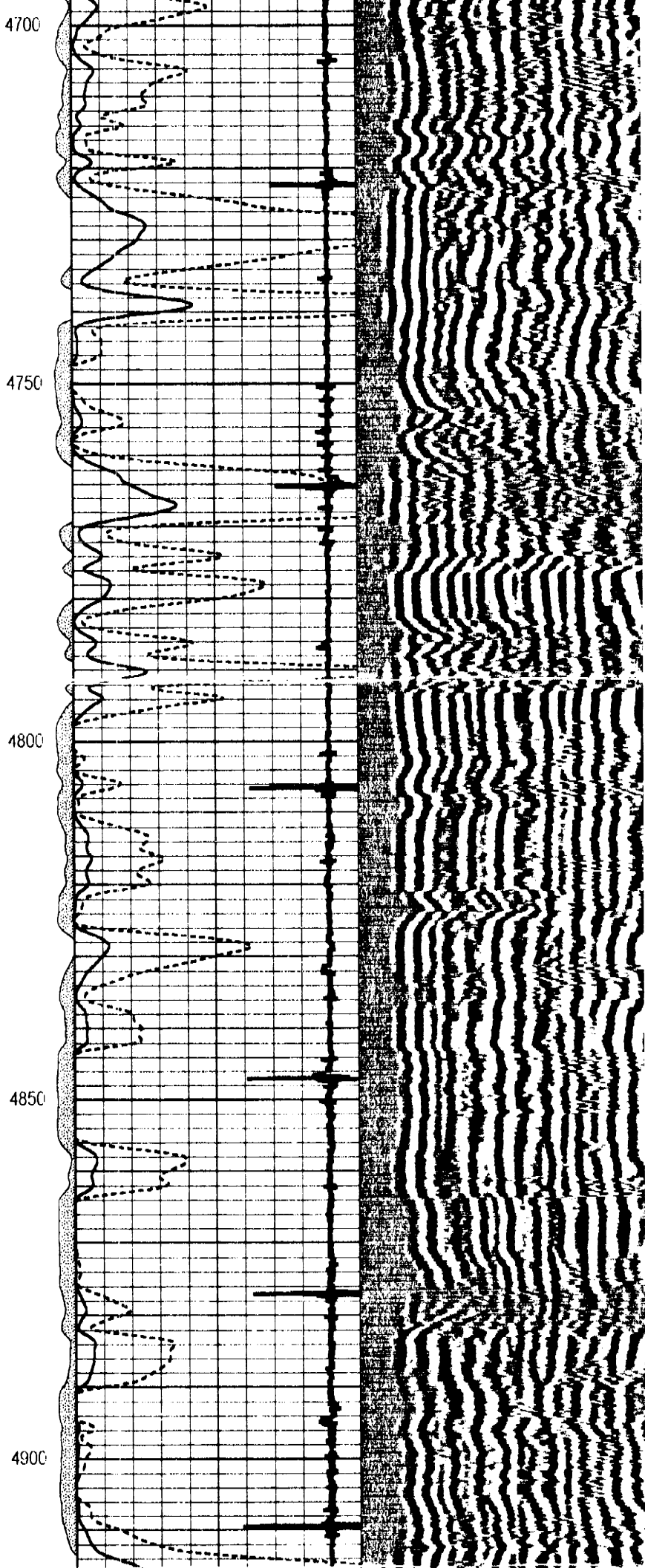
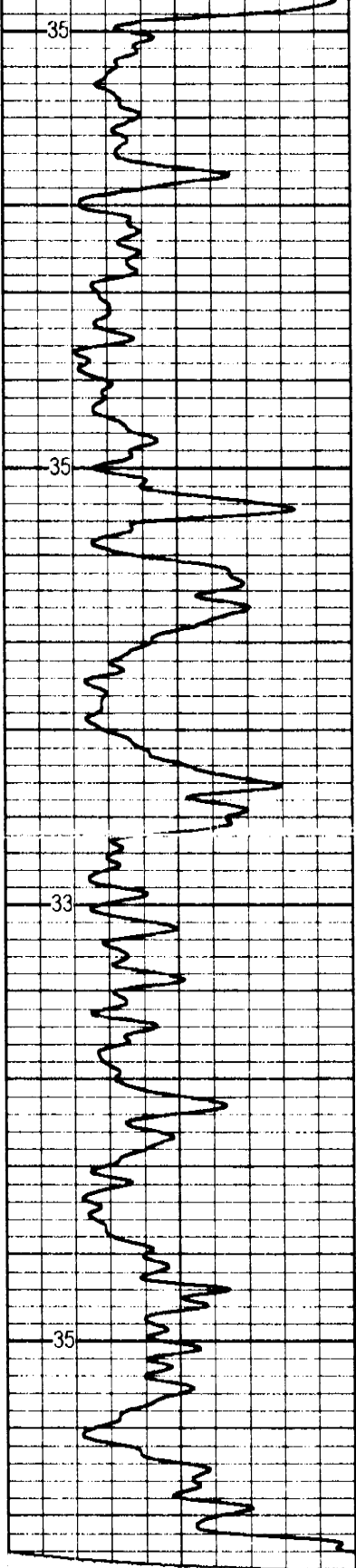
COLDWATER & HWY. 183, 2 NORTH
TO mm39, 2 WEST, 1.4 SOUTH
1.3 WEST THRU C.G
ADJUST 2' UP-HOLE TO O.H. LOG

Dataset Pathname: grcb/pass4
Presentation Format: cblsr.prs
Dataset Creation: Mon Jul 02 13:35:17 2001 by Log VER_5.3
Charted by: Depth in Feet scaled 1:240

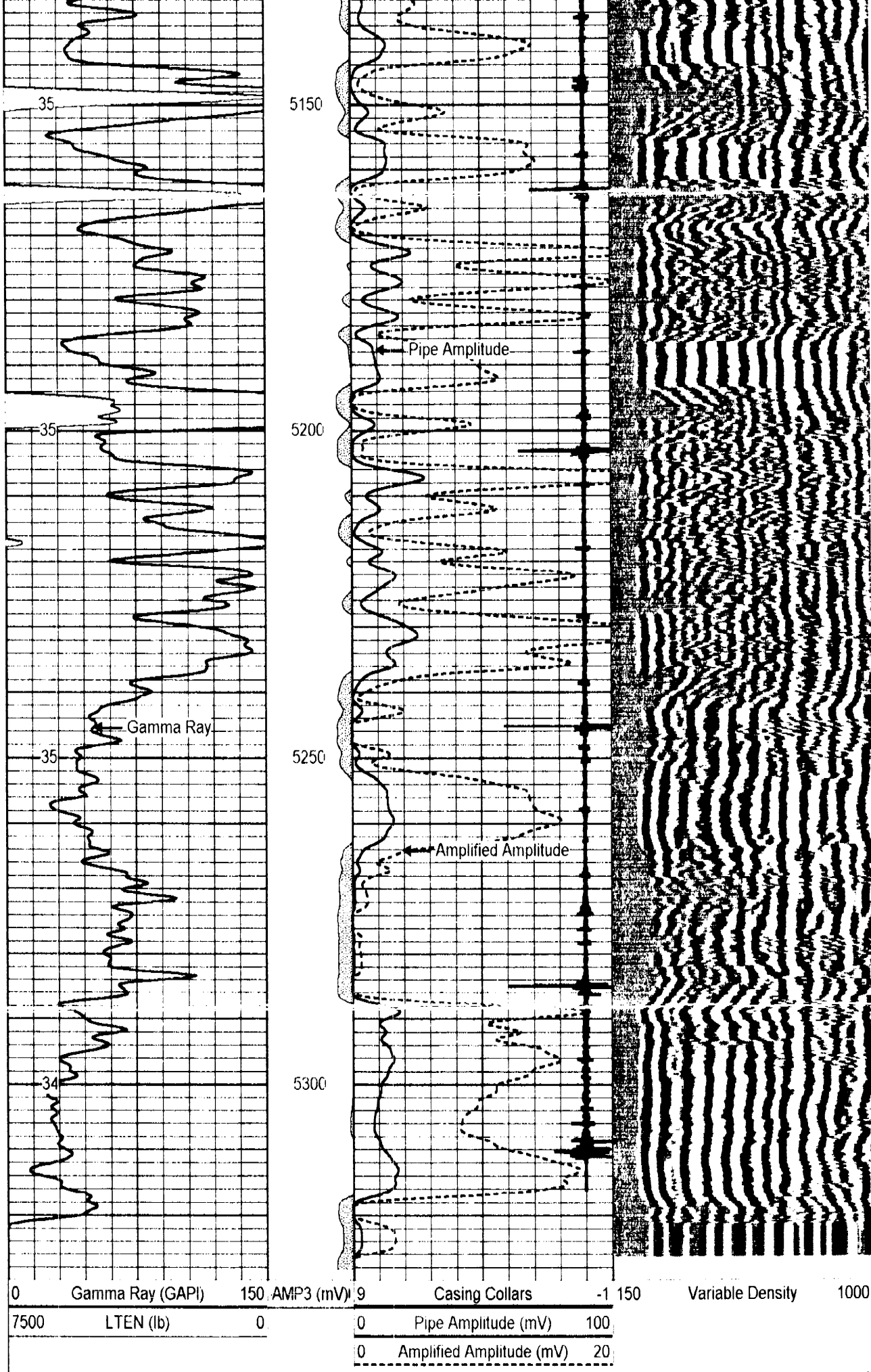
0	Gamma Ray (GAPI)	150	AMP3 (mV)	9	Casing Collars	-1	150	Variable Density	1000
7500	LTEN (lb)	0		0	Pipe Amplitude (mV)	100			
				0	Amplified Amplitude (mV)	20			







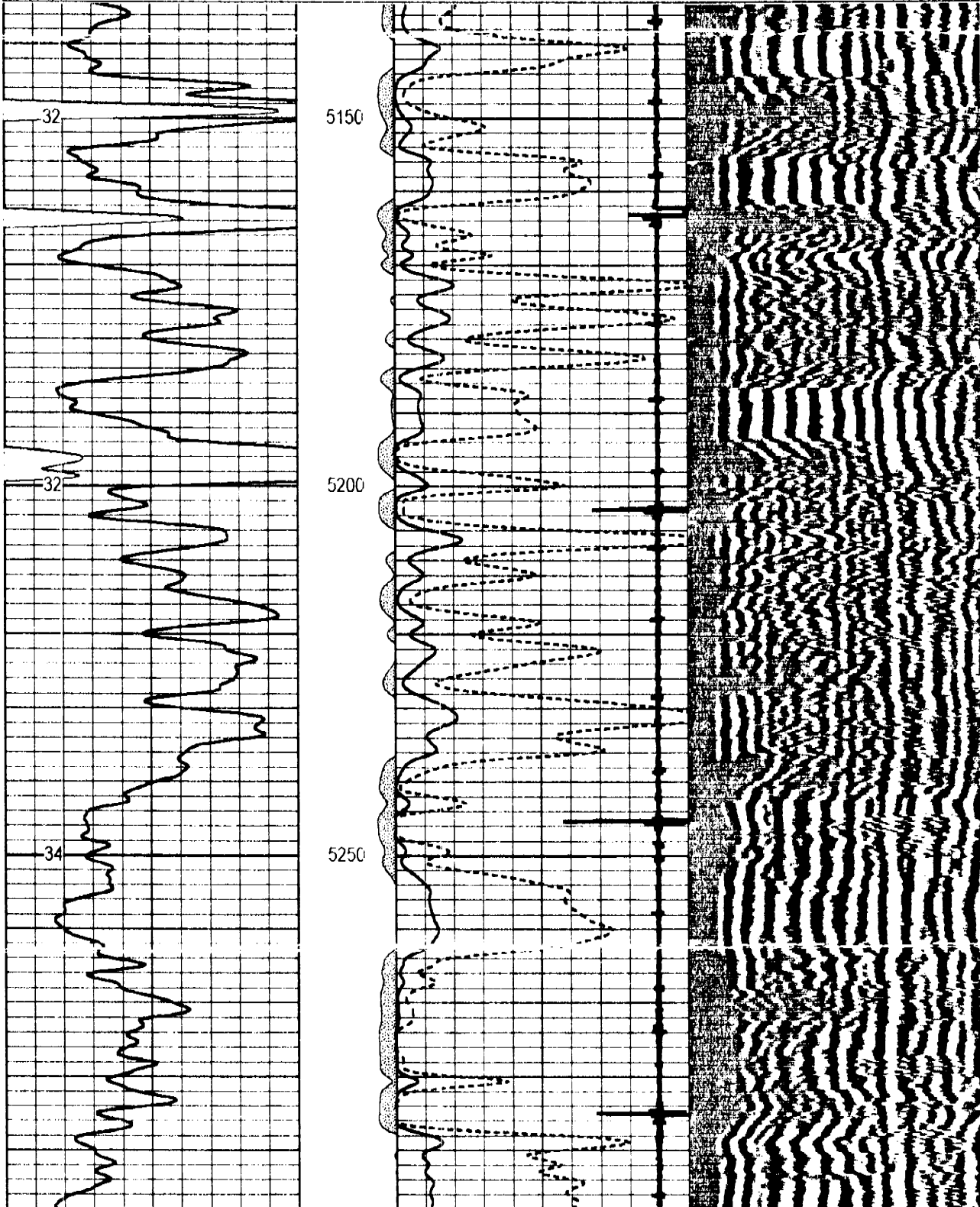


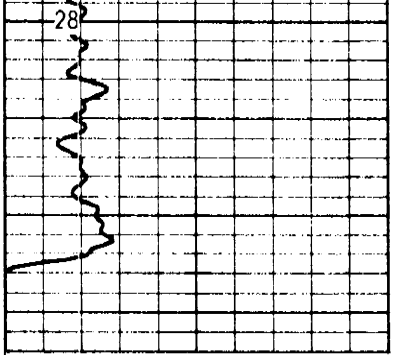


REPEAT SECTION

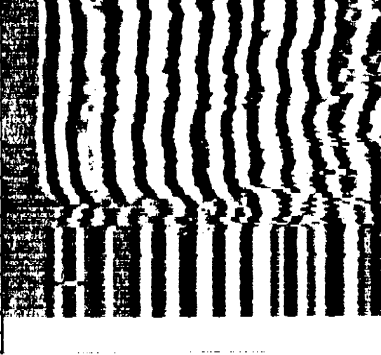
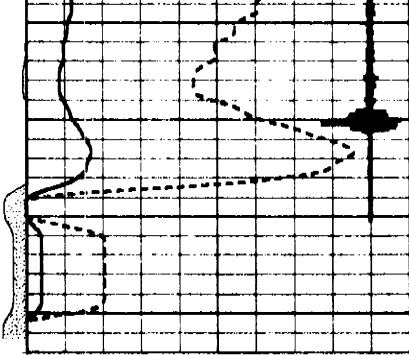
Database File: rjbean.db
 Dataset Pathname: grcbl/pass3
 Presentation Format: cblsr.prs
 Dataset Creation: Mon Jul 02 13:27:21 2001 by Log VER_5.3
 Charted by: Depth in Feet scaled 1:240

0	Gamma Ray (GAPI)	150	AMP3 (mV)	9	Casing Collars	-1	150	Variable Density	1000
7500	LTEN (lb)	0	0	Pipe Amplitude (mV)	100	0	Amplified Amplitude (mV)	20	





5300



0 Gamma Ray (GAPI) 150
7500 LTEN (lb) 0

AMP3 (mV) 9 Casing Collars -1 150
0 Pipe Amplitude (mV) 100

Variable Density 1000

0 Amplified Amplitude (mV) 20

COPY

OIL & GAS CONSERVATION DIVISION WELL COMPLETION FORM WELL HISTORY - DESCRIPTION OF WELL & LEASE

Form ACO-1
September 1999
Form Must Be Typed

JUL 25 2001

Operator: License # 6528
 Name: R.J. Patrick Operating Company
 Address: PO Box 1157
 City/State/Zip: Liberal, Kansas 67905-1157
 Purchaser: _____
 Operator Contact Person: R.J. Patrick
 Phone: (620) 624-8483
 Contractor: Name: Duke Drilling Co., Inc.
 License: 5929
 Wellsite Geologist: Bob Posey

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>06-15-01</u>	<u>06-27-01</u>	<u>07-21-01</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 033-21233-0000
 County: Comanche County, Kansas
 NW NW NE/4 Sec. 4 Twp. 32 S. R. 19 East West
330 feet from S (N) Line of Section
2310 feet from E (W) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW

Lease Name: Inez Bean Well #: 2-4

Field Name: Wildcat

Producing Formation: _____

Elevation: Ground: 2119' Kelly Bushing: 2130'

Total Depth: 5373' Plug Back Total Depth: 5325

Amount of Surface Pipe Set and Cemented at 668 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from 668

feet depth to surface w/ 225 sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content 9,000 ppm Fluid volume 650 bbls

Dewatering method used settled water & hauled

Location of fluid disposal if hauled offsite: _____

Operator Name: KBW Oil & Gas Company

Lease Name: Harmon SWD License No.: 5993

Quarter NW Sec. 11 Twp. 33 S. R. 20 East West

County: Comanche Docket No.: 22304

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: RJ Patrick

Title: owner Date: 7-23-01

Subscribed and sworn to before me this 23 day of July

2001

Notary Public: Jay B Berry

Date Commission Expires: 04-04-04

KCC Office Use ONLY

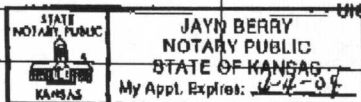
Letter of Confidentiality Attached

If Denied, Yes Date: _____

Wireline Log Received

Geological Report Received

Use Distribution



D104#1

Operator Name: R.J. Patrick Operating Company Lease Name: Inez Bean Well #: 2-4
 Sec. 4 Twp. 32 S. R. 19 East West County: Comanche County, Kansas

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 Yes No
 (Attach Additional Sheets)

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No
 (Submit Copy)

List All E. Logs Run: Dual Induction - Dual Compensated Porosity - Micro - Compensated Sonic and Geological Log.

Name	Top	Datum
Lansing	4574	-2425
Swope	4880	-2731
Marmaton	5040	-2891
Ft. Scott	5151	-3002
Cherokee Shale	5162	-3013
Mississippian	5240	-3091

CASING RECORD New 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	# Sacs Used	Type and Percent Additives
Conductor	17-1/2"	13-3/8"	48#	298'	Acon&common	110/100	3%cc 2%gel
Surface	12-1/4"	8-5/8"	23#	668'	Acon&common	125/100	2%cc
Production	7-7/8"	4-1/2"	10.5#	5373'	50/50 Poz	250	18%salt

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				

PERFORATION RECORD - Bridge Plugs Set/Type
 Specify Footage of Each Interval Perforated

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot Cement Squeeze Record (Amount and Kind of Material Used)	Depth
2	5298 to 5310 CIBP Set @ 5280	1500 Gal MCA	5298
4	4768 to 4774	2000 Gal 15%	

TUBING RECORD Size 2 3/8 Set At 4707 Packer At 4715 Liner Run Yes No

Date of First, Resumed Production, SWD or Enhr. No Production (Further procedure pending). Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	0	0	100		

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

Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled
 (If vented, Submit ACO-18.) Other (Specify)

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

February 02, 2012

Jim Byers and Kevin Fischer
Apollo Energies, Inc.
10378 N 281 HWY
PRATT, KS 67124-7920

Re: Plugging Application
API 15-033-21233-00-00
INEZ BEAN 2-4
NE/4 Sec.04-32S-19W
Comanche County, Kansas

Dear Jim Byers and Kevin Fischer:

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 July 31, 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 1

(620) 225-8888