



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	Wildcat Oil & Gas LLC
Well Name	POMEROY J G 3
Doc ID	1084659

Perforations And Bridge Plug Sets

Perforation Top	Perforation Base	Formation	Bridge Plug Depth
4239	4247	Mississippi	

SCHLUMBERGER WELL SURVEYING CORPORATION

HOUSTON, TEXAS



Sonic Log

COUNTY FIELD or LOCATION WELL COMPANY	COMPANY	Other Surveys
	PAN AMERICAN PET. CORP	LL
	WELL POMERDY #3	Location of Well
	FIELD SPIVEY - GRABS	
	LOCATION 5-30S-8W	
	C SW SW SE	
	COUNTY KINGMAN	Elevation: K.B.: 1563
	STATE KANSAS	D.F.: 1561
		or G.L.:

Log Depths Measured From		KB	Ft. above		GL
RUN No.	1				
Date	8-13, 14-60				
First Reading	4286				
Last Reading	3286				
Feet Measured	1000				
Csg. Schlum.	302				
Csg. Driller	302				
Depth Reached	4289				
Bottom Driller	4290				
Mud Nat.	GEL				
Dens. Visc.	10.1	45			
Mud Resist.	.133	@ 70 °F	@	°F	@ °F
" Res. BHT	.095	@ 108 °F	@	°F	@ °F
" pH	6	@ °F	@	°F	@ °F
" Wtr. Loss	10	CC 30 min	CC 30 min		CC 30 min
" Rmf	.095	@ 70 °F	.07	@ 108 °F	@ °F
Bit Size	7 7/8				
Span:					
3'	4150	To TD	To		To
1'	3290	To TP	To		To
Opr. Rig Time	1 1/2 hrs				
Truck No.	2536 PRATT				
Recorded By	MR CARR				
Witness	MR WALLER, ROBINSON				

FOLD HERE

REMARKS VLP No.:

VIS No.:

VLP No.:

REGULAR SONIC CENTRALIZERS USED

Velocity (feet per second) = 1,000,000 Interval Transit Time (microseconds per foot)

SPONTANEOUS-POTENTIAL
millivolts



GAMMA RAY

0 10 20

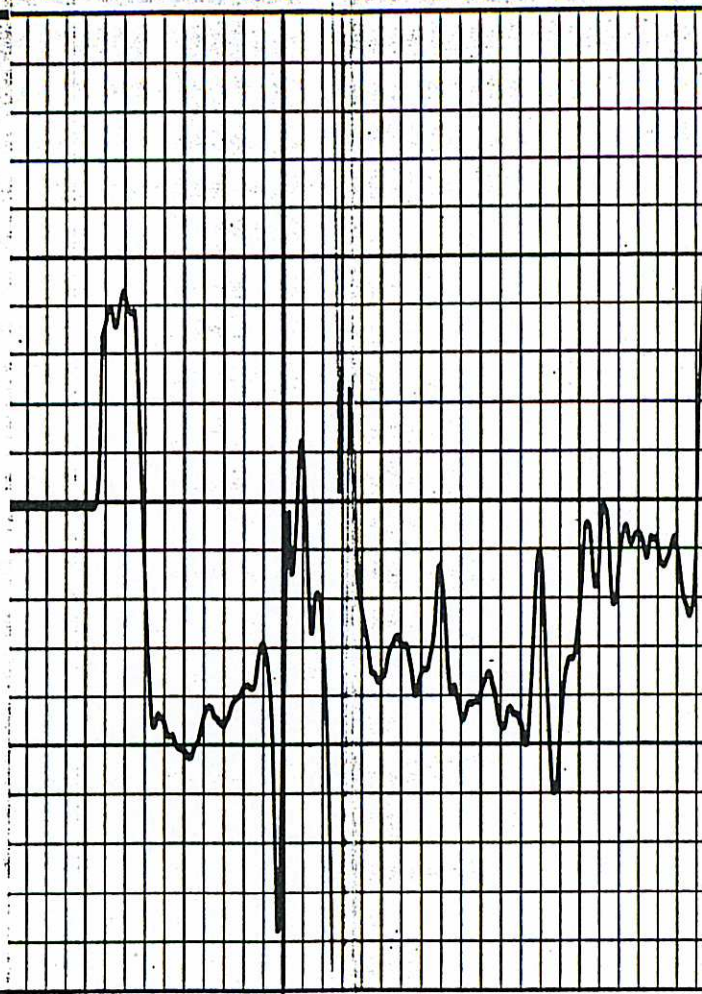
DEPTHS

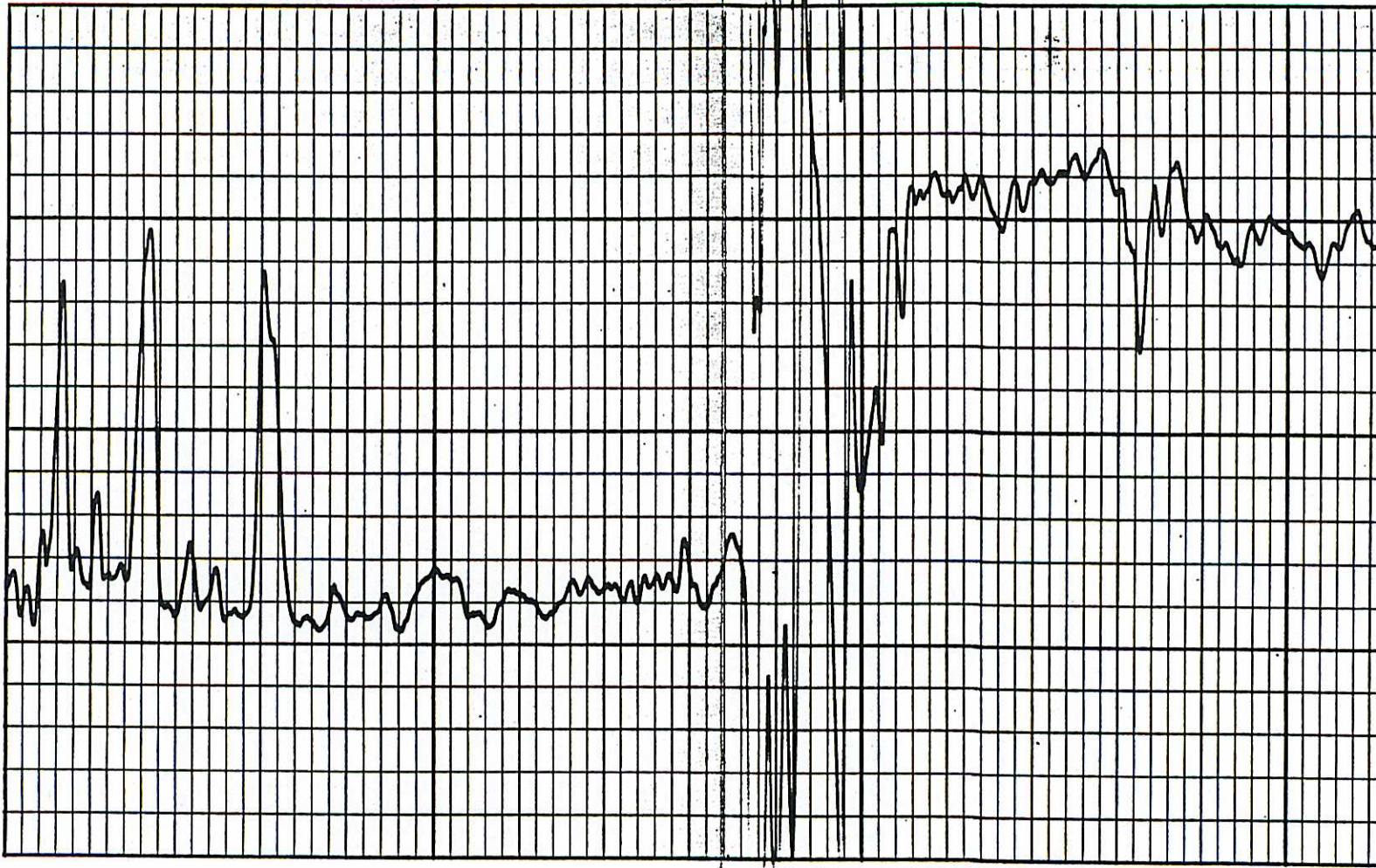
3300

INTERVAL TRANSIT TIME

microseconds per foot
← T — R₁ — R₂ → increases

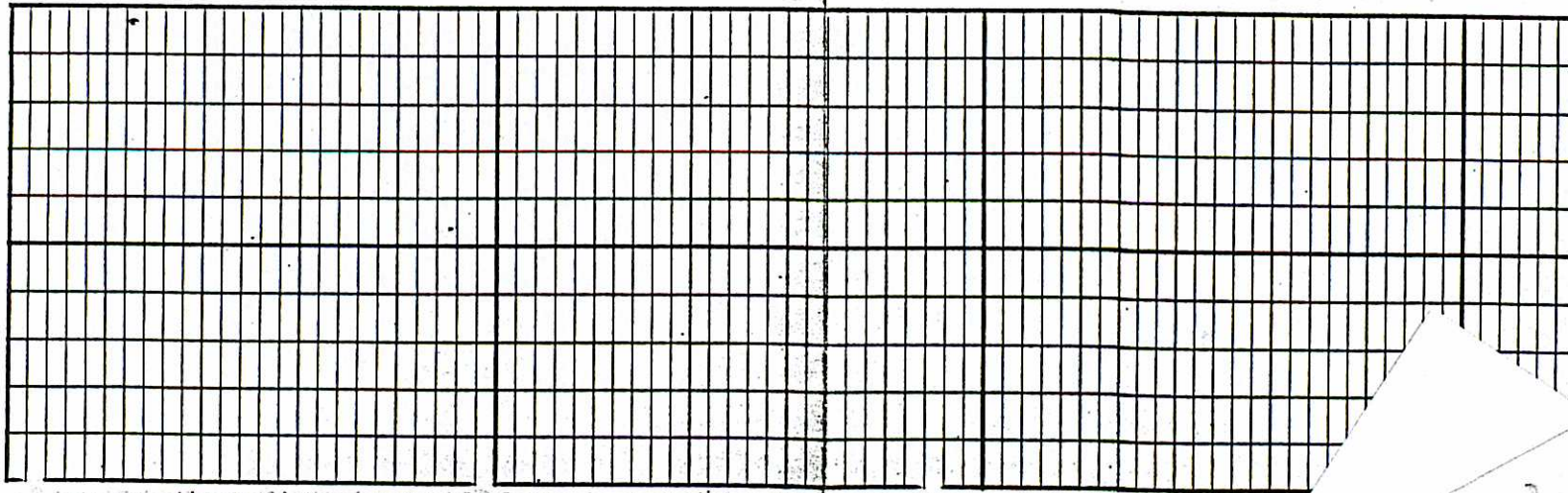
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70 130
40 100

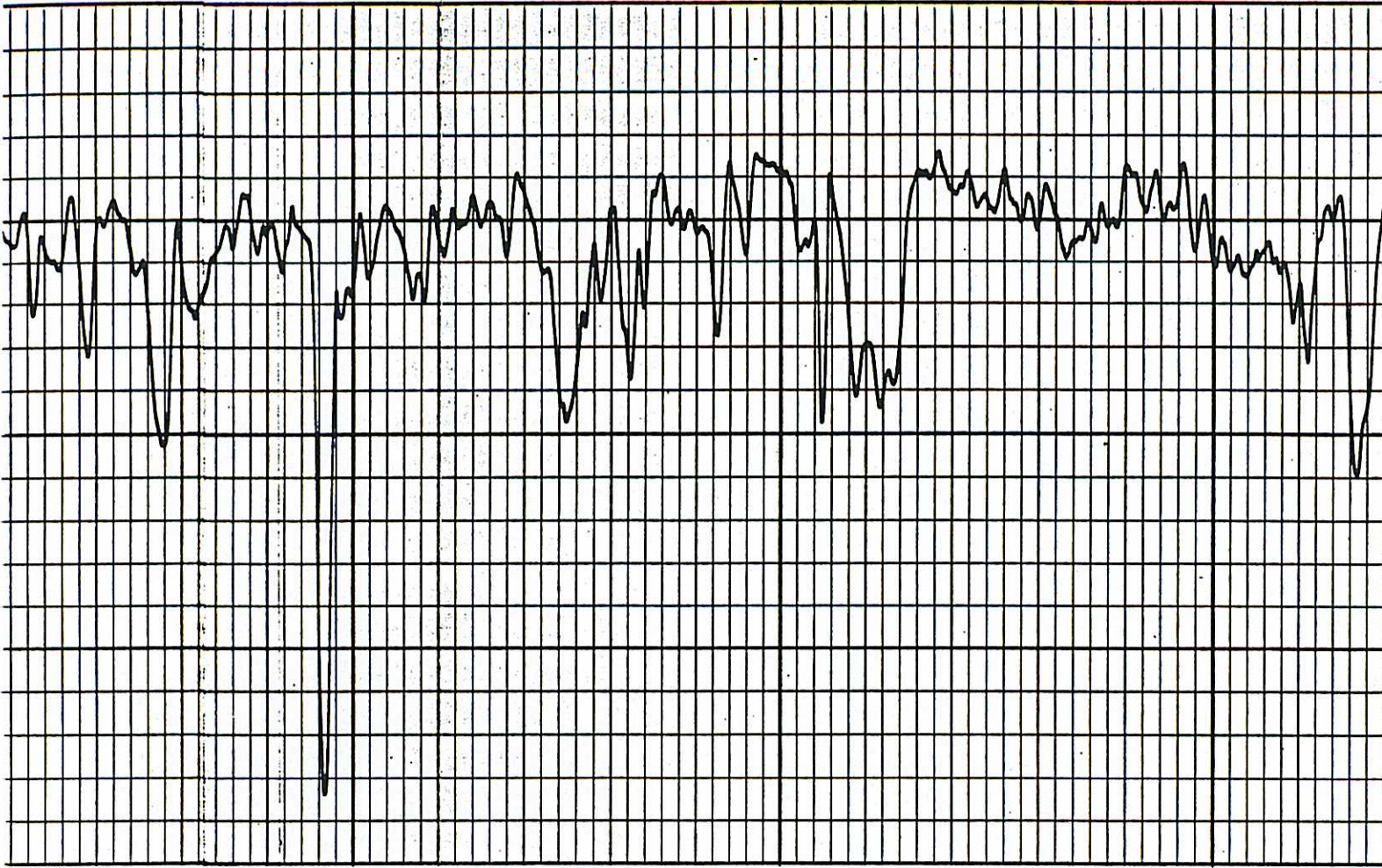




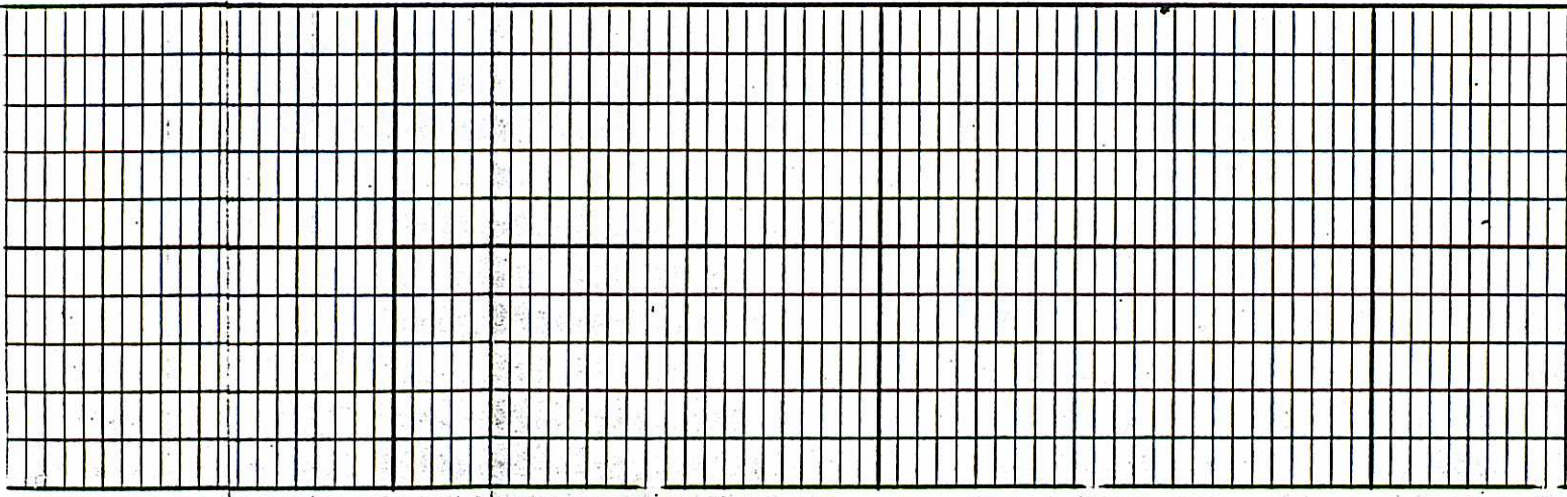
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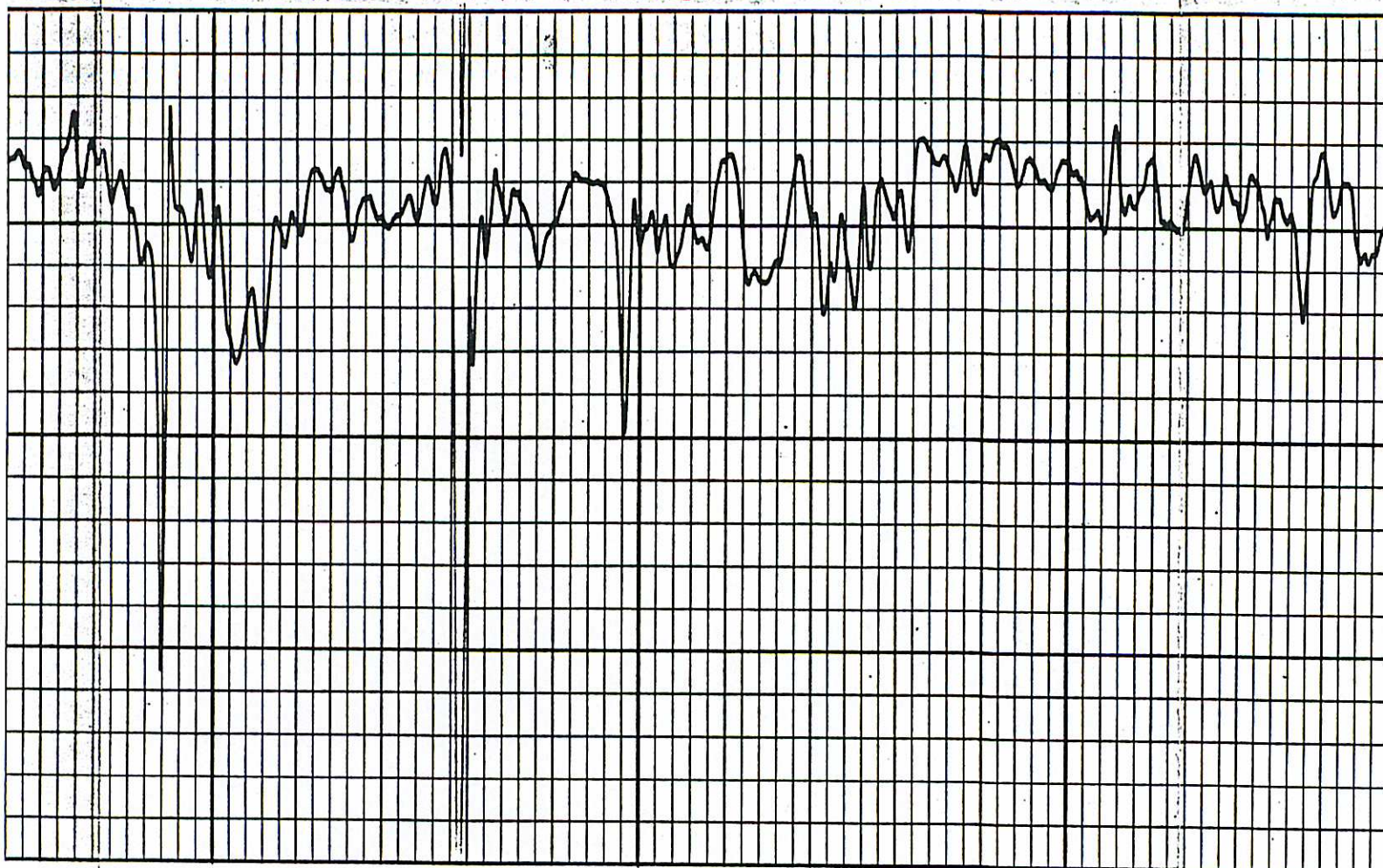
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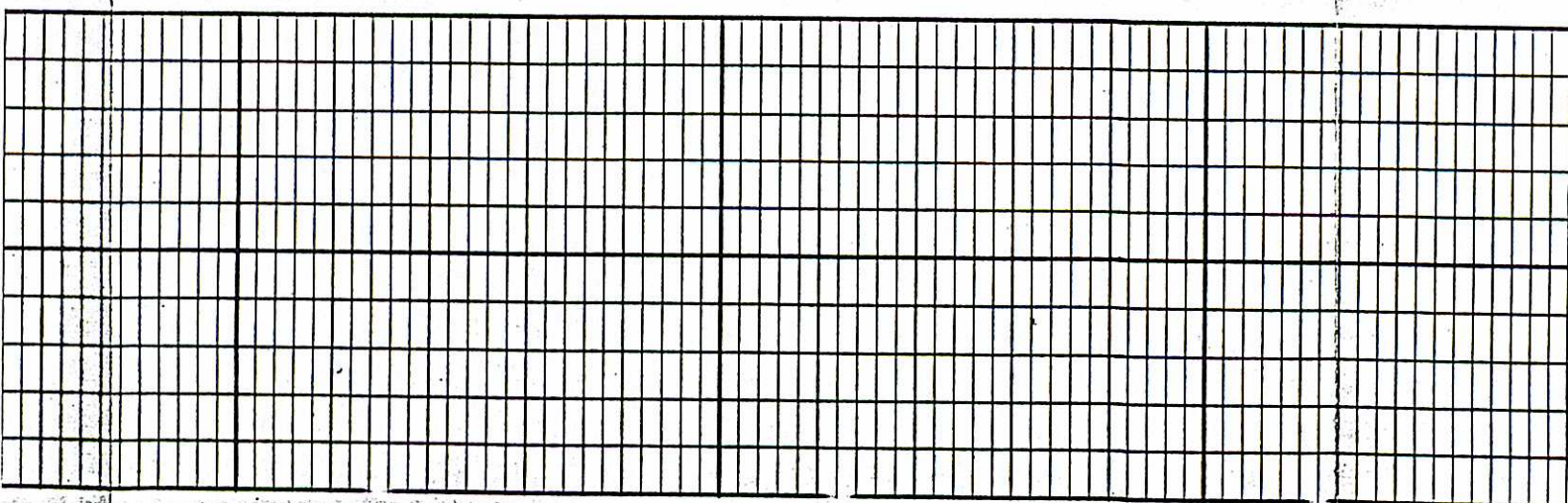
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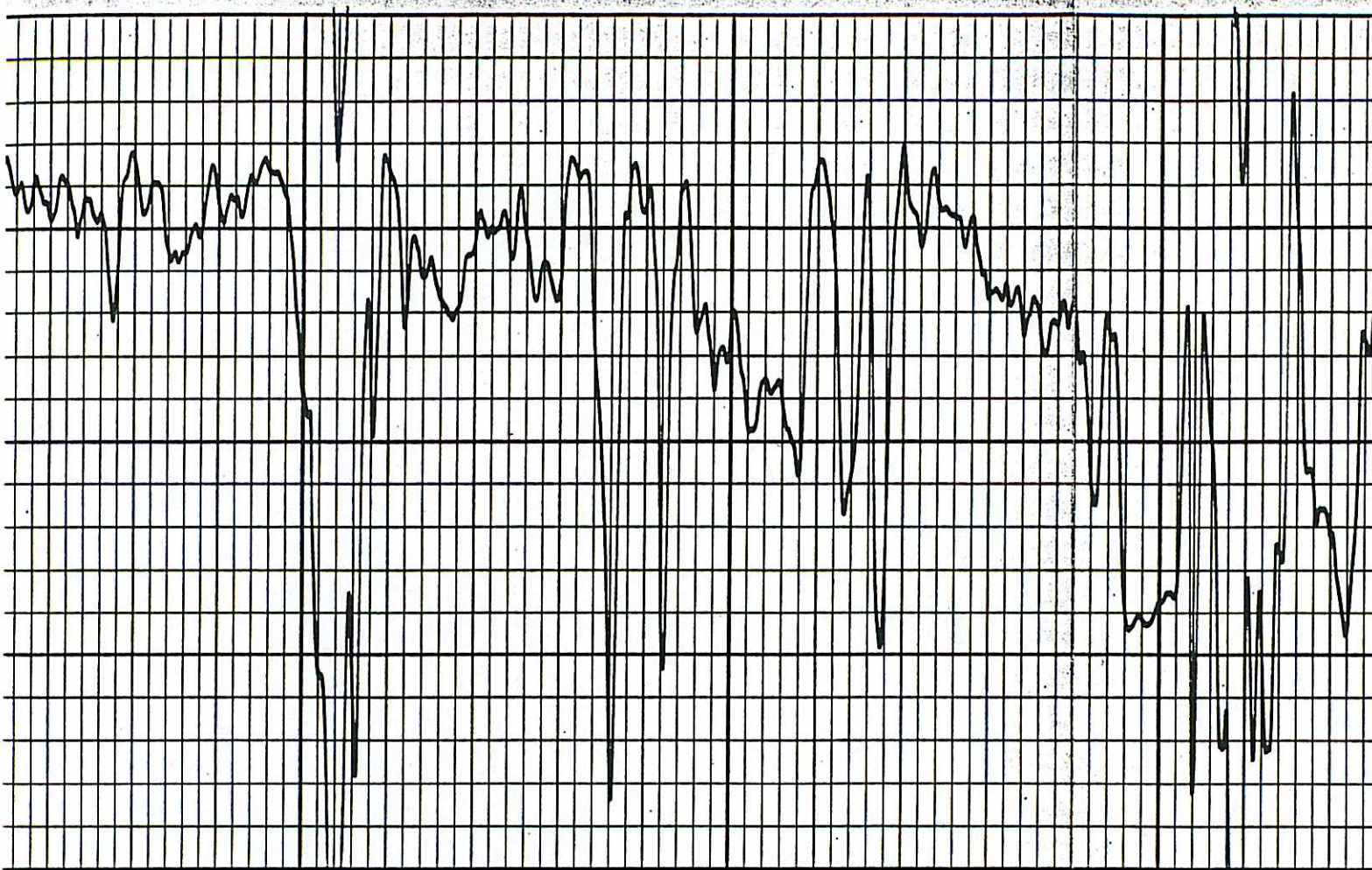




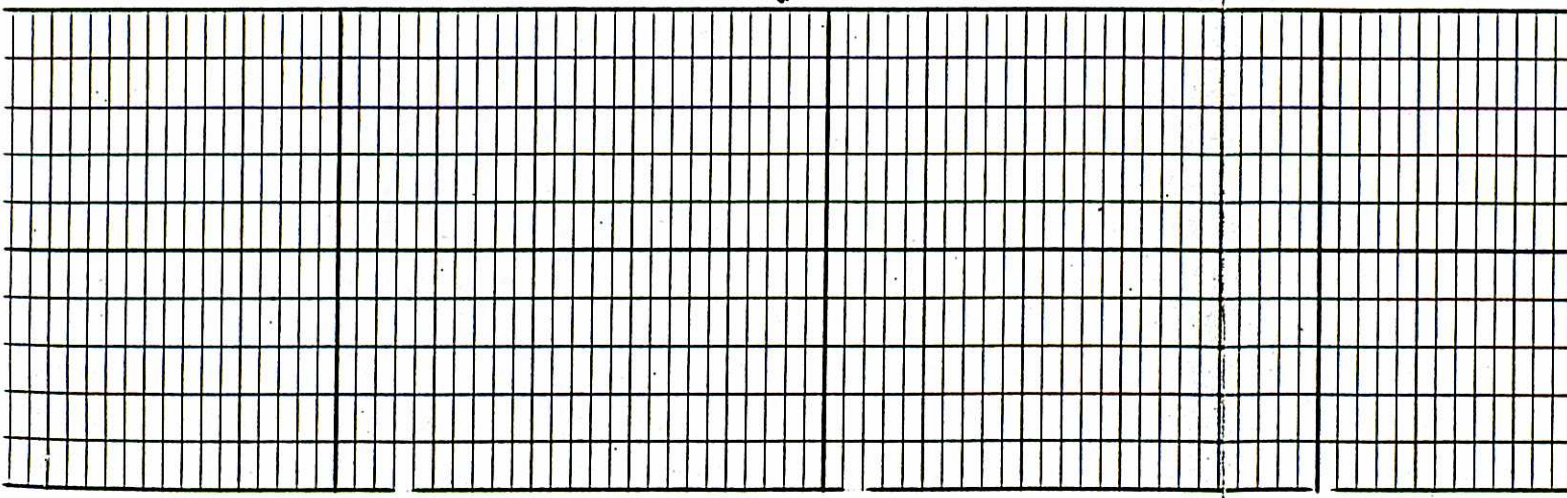
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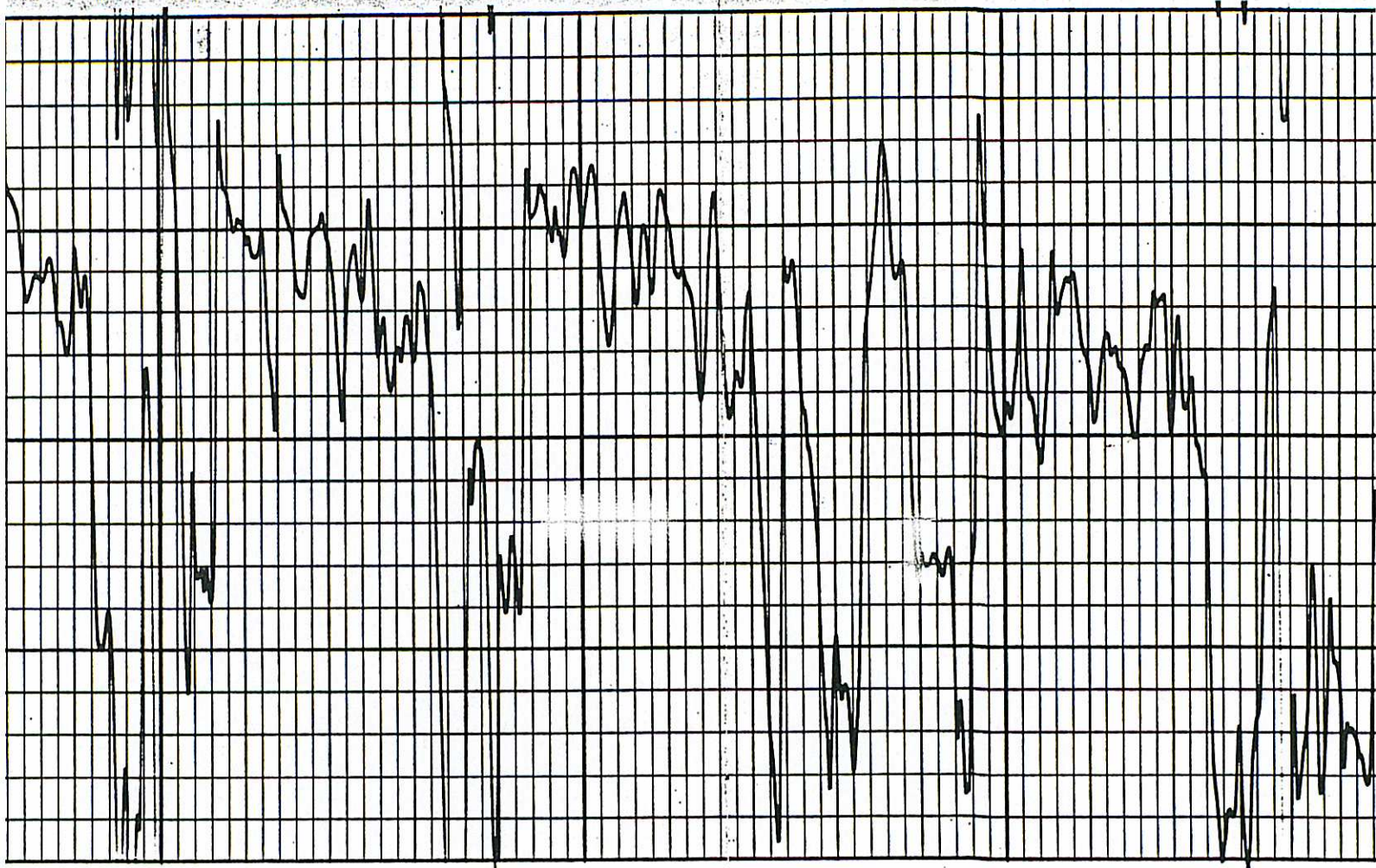
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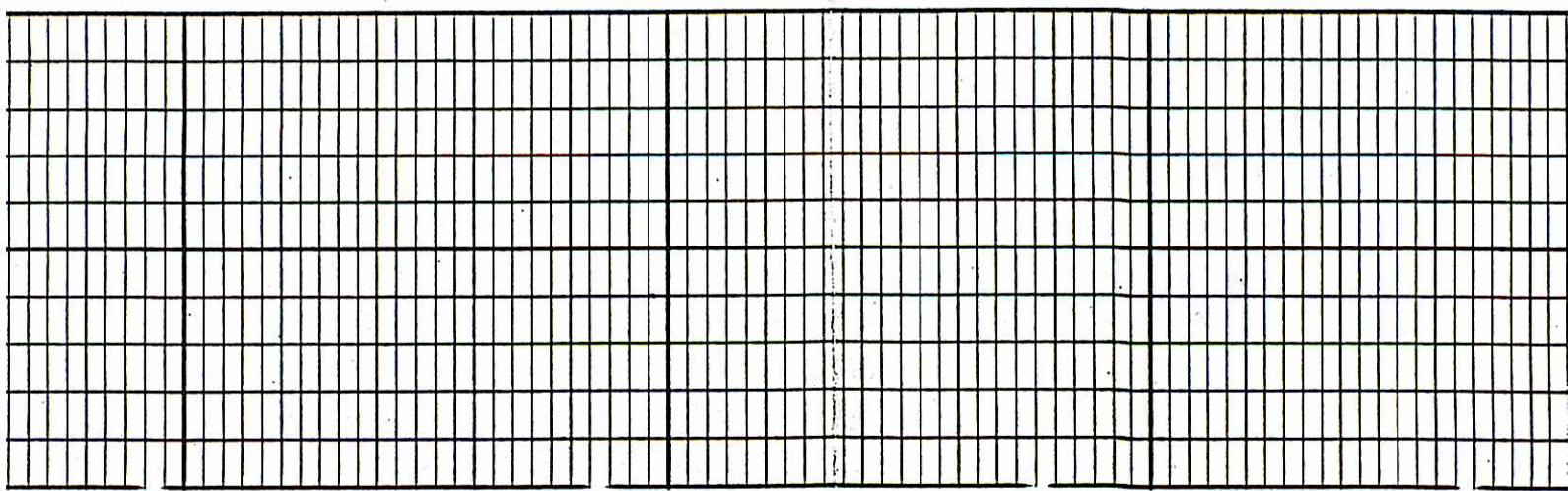
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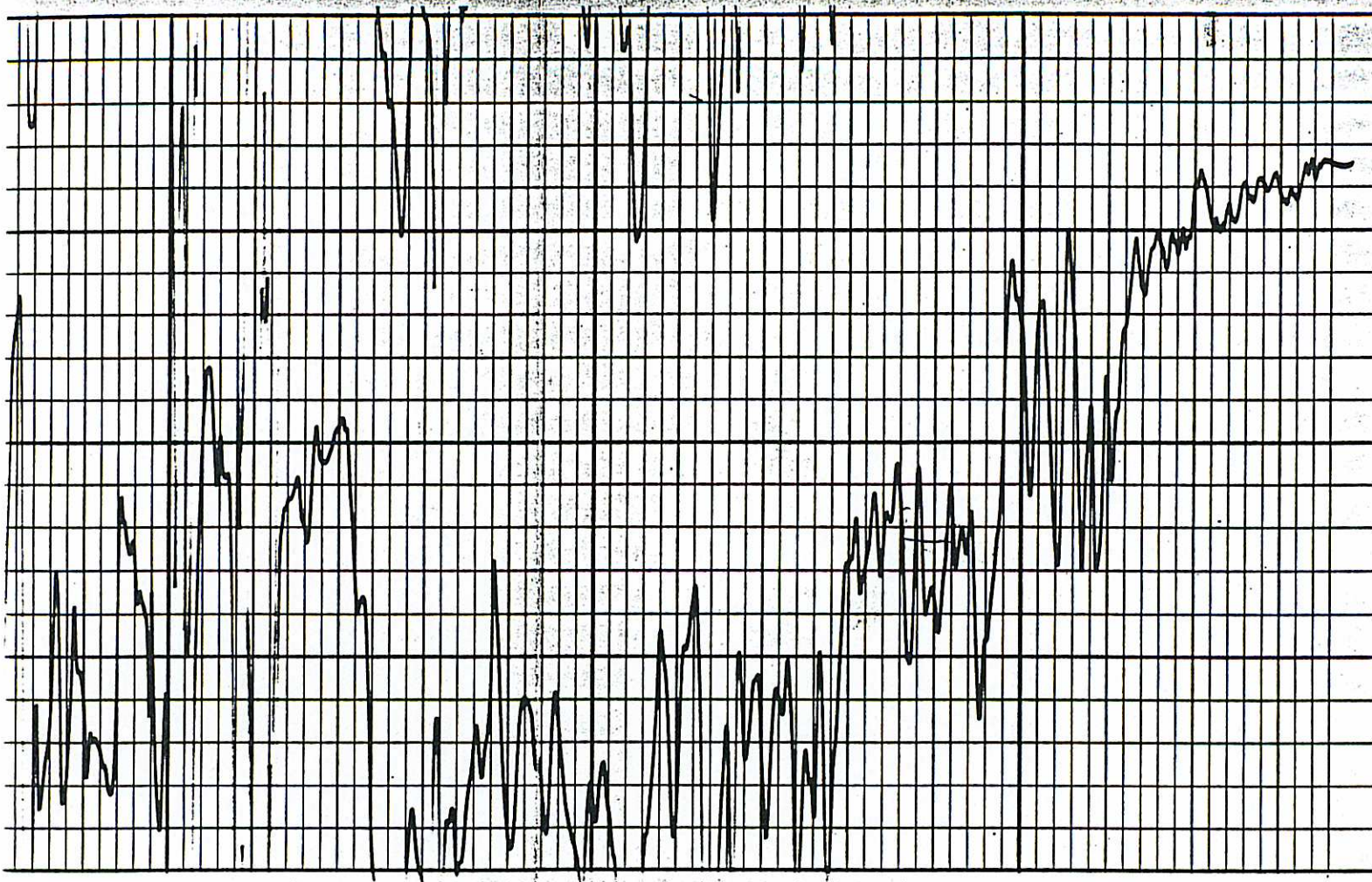




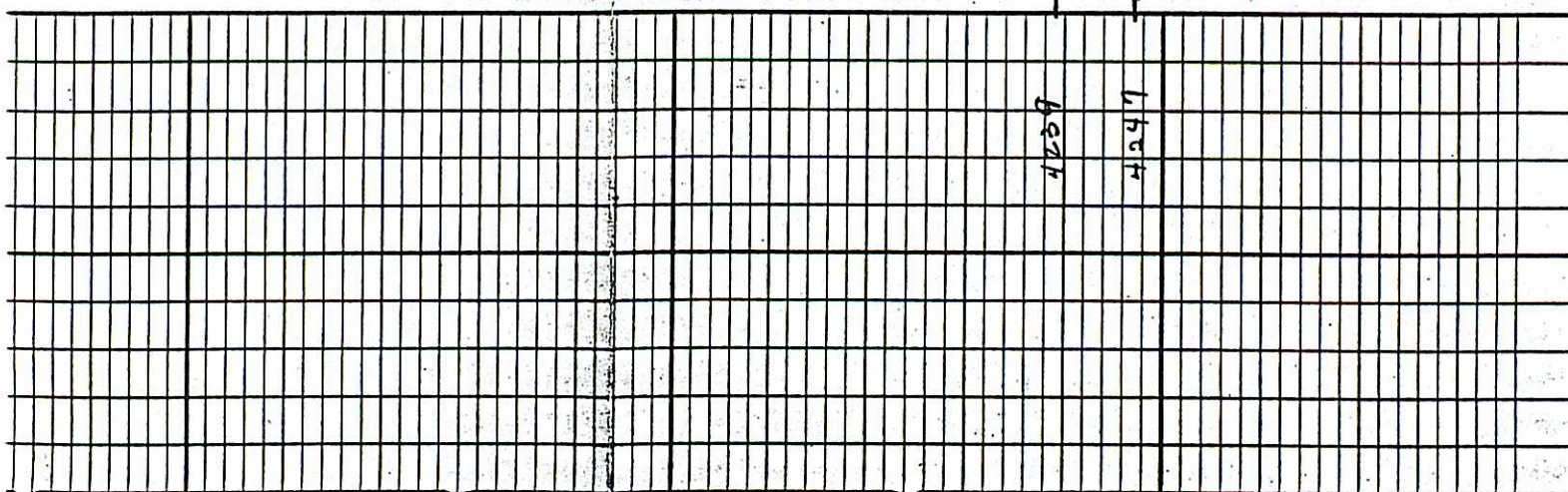
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4100





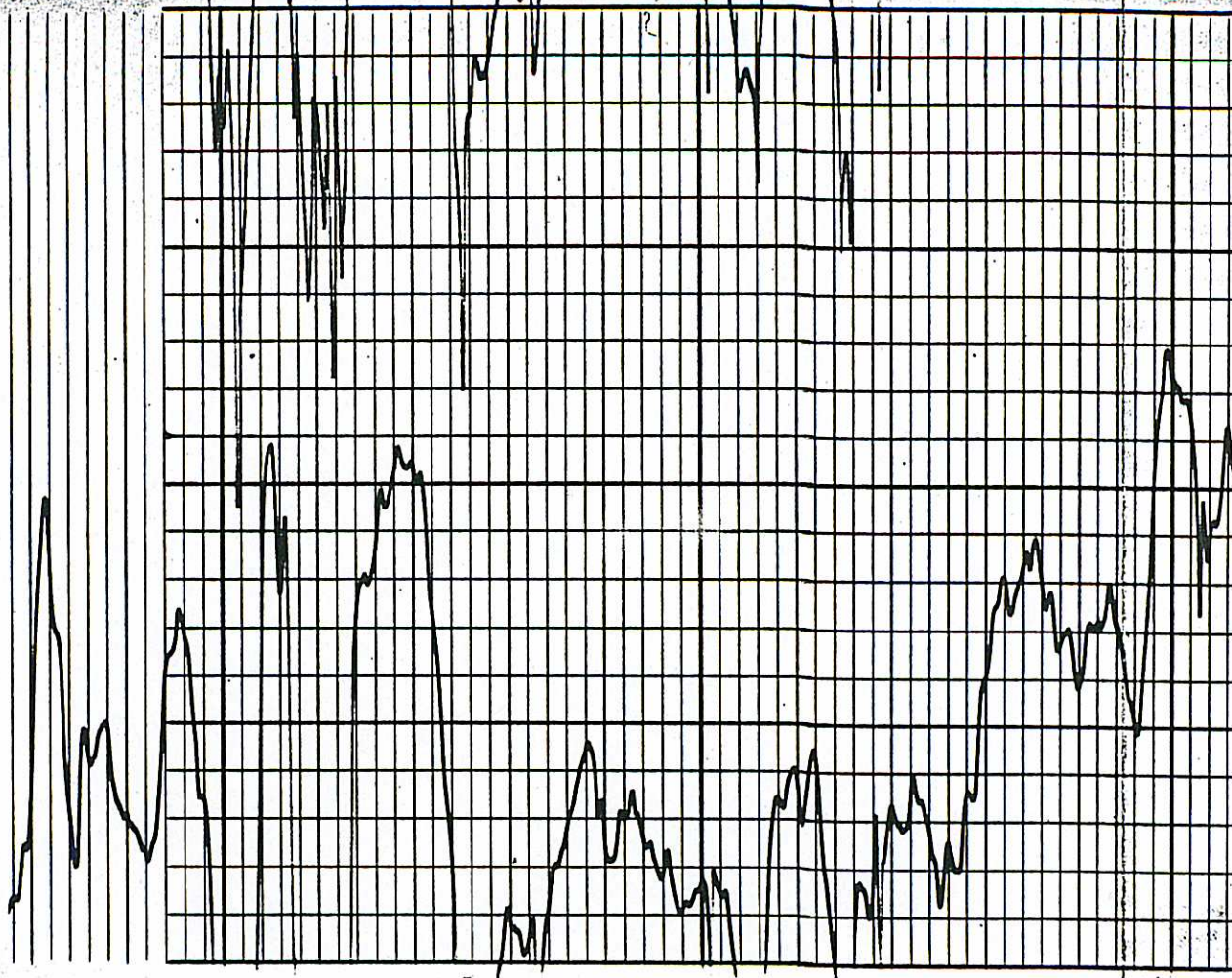
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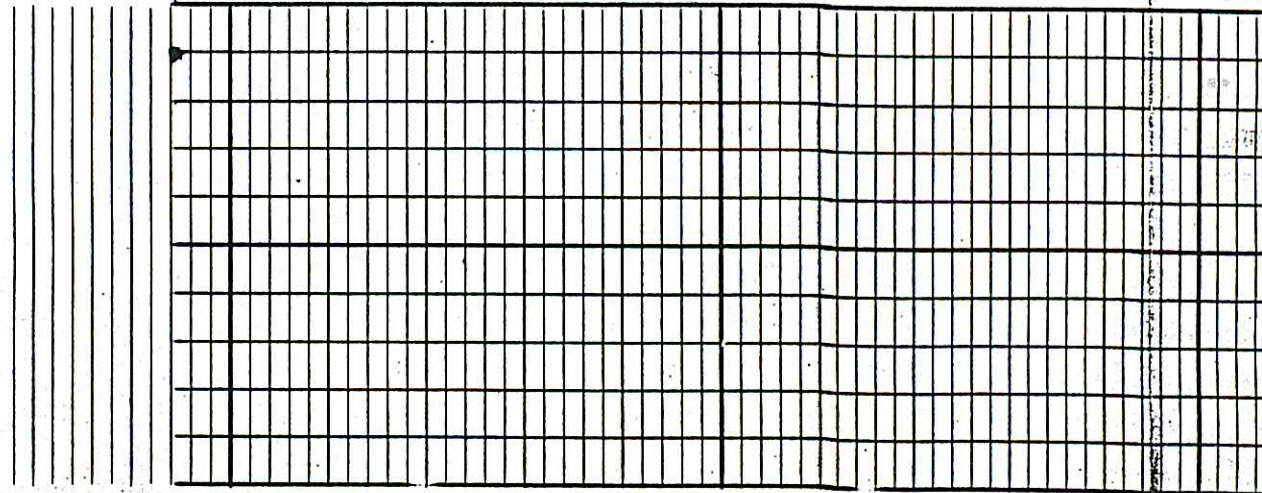
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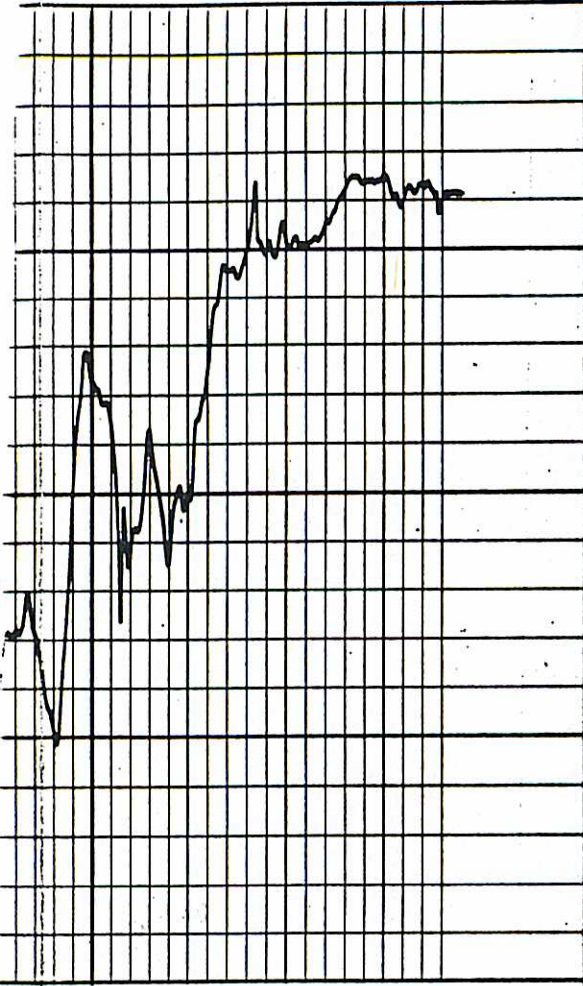
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REPEAT RUN 3' SPACING



4200

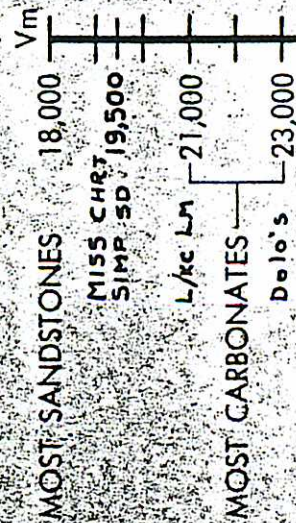




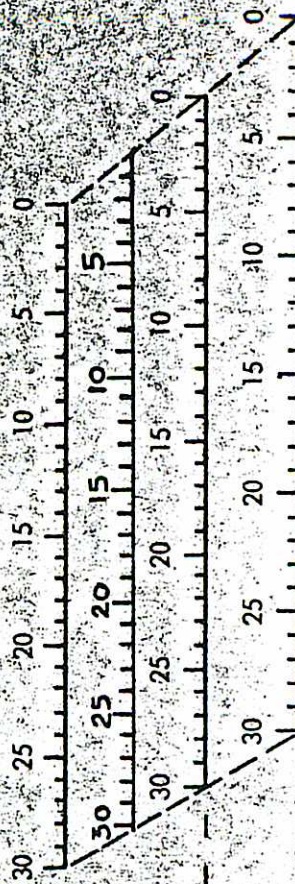
SONIC LOG INTERPRETATION CHART

scale of 30 microseconds per foot

SUGGESTED MATRIX VELOCITY



PERCENT POROSITY



SCHLUMBERGER WELL SURVEYING CORPORATION

HOUSTON, TEXAS



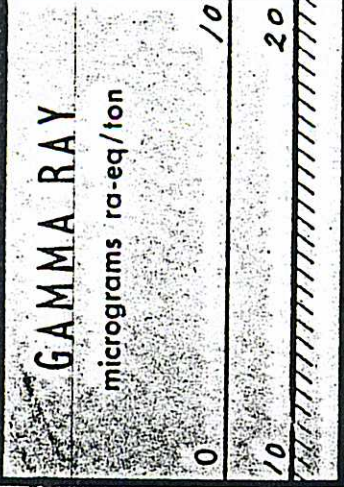
Laterolog

WITH GAMMA RAY

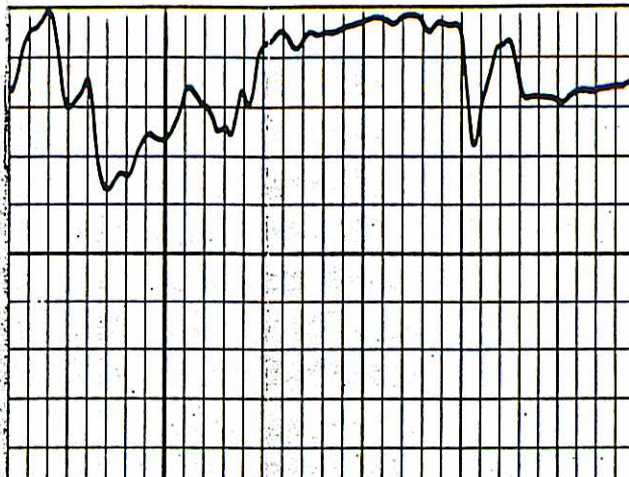
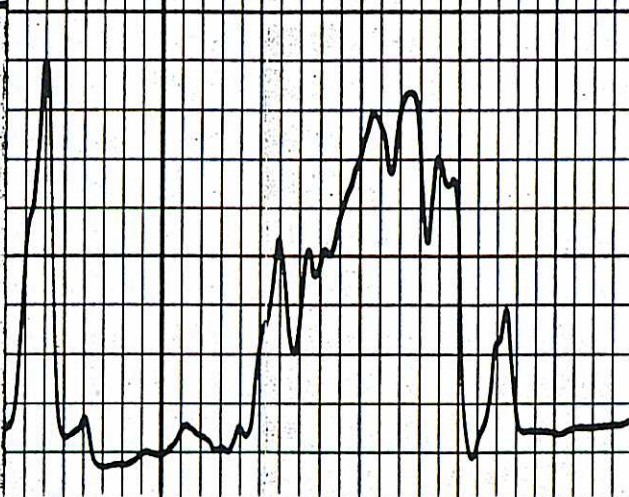
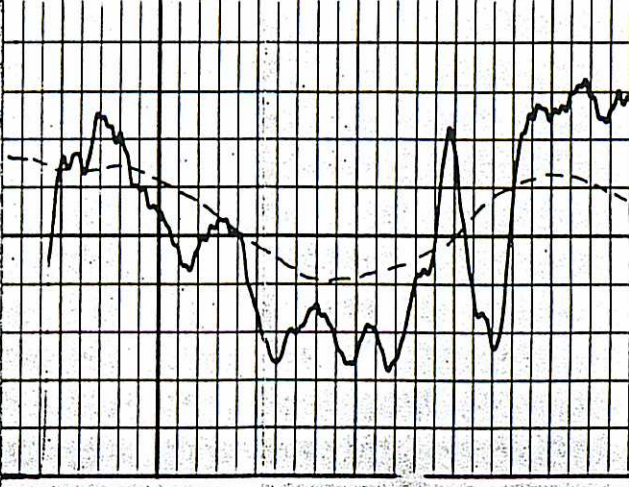
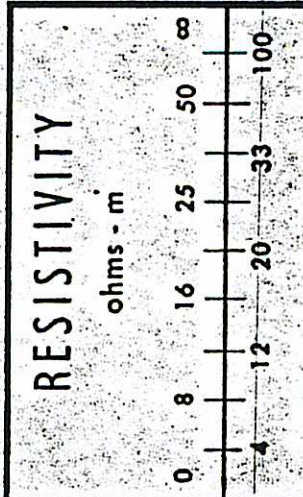
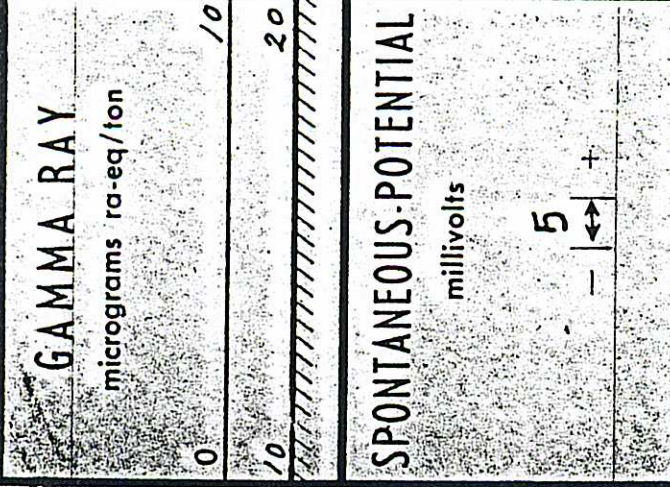
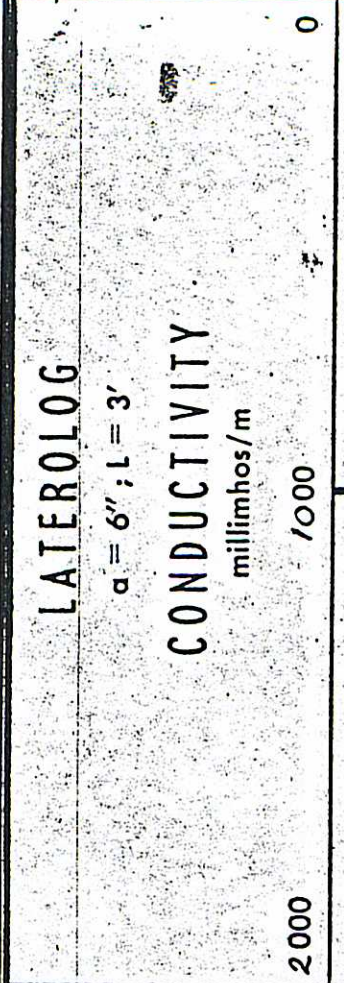
COUNTY FIELD or LOCATION WELL COMPANY	COMPANY	Other Surveys
	PAN AMERICAN PET CORP	GR-SONIC
	WELL G. POMEROY # 3	Location of Well
	FIELD SPIVEY-GRABS	
	LOCATION 5-30S-8W	
	C SW SW SE	
	COUNTY KINGMAN	Elevation: K.B.: 1562
	STATE KANSAS	D.F.: 1561
		or G.L.:

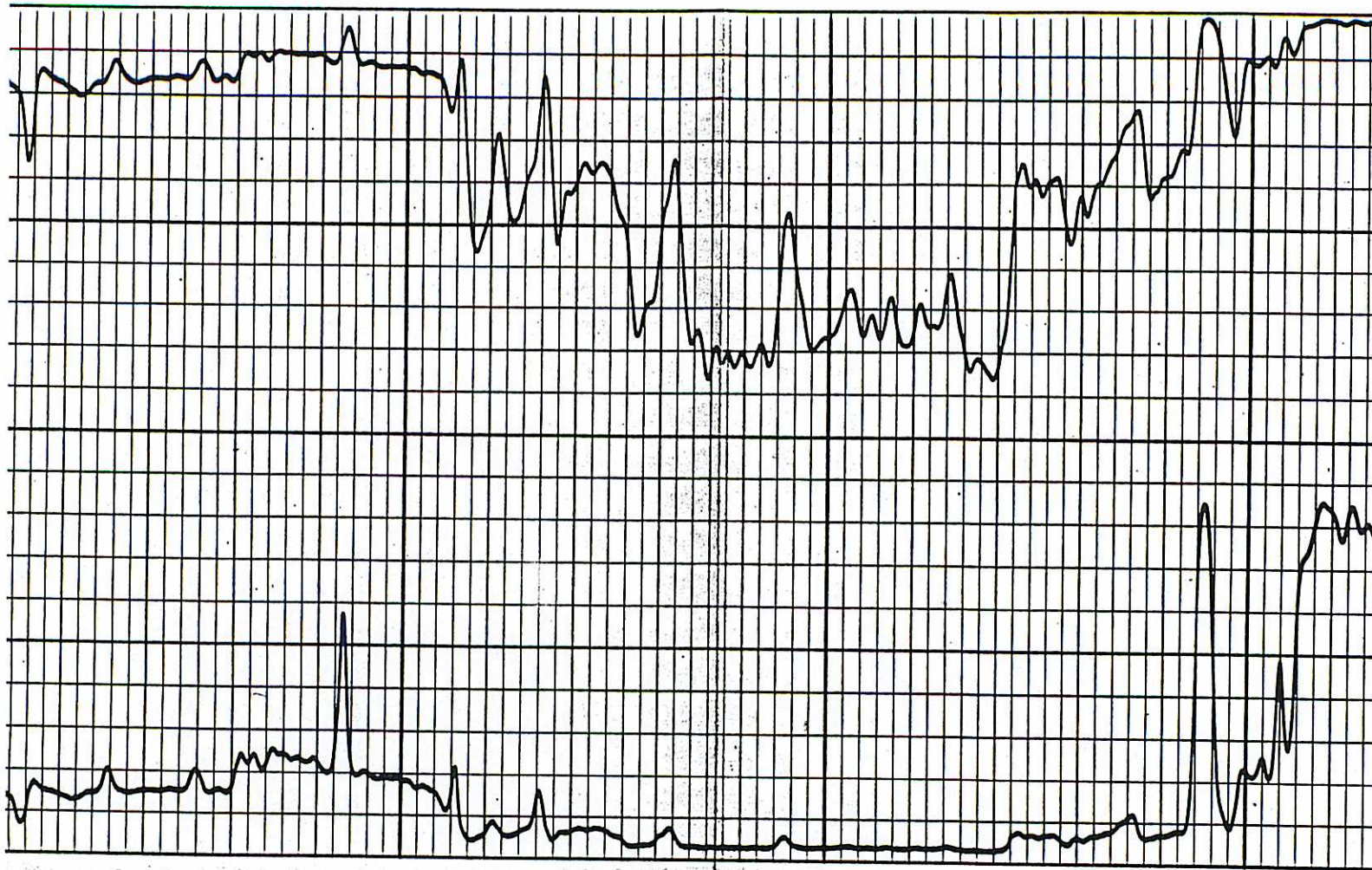
Log Depths Measured From		KB		Ft. above		GL	
RUN No.	1						
Date	3-13-60 ✓						
First Reading	4287						
Last Reading	302						
Feet Measured	3985						
Csg. Schlum.	302						
Csg. Driller	302						
Depth Reached	4290						
Bottom Driller	4290						
Mud Nat.	GEL						
Dens.	Visc.	10.1	45				
Mud Resist.	.133	@	70 °F	@	°F	@	°F
Res. BHT	.095	@	108 °F	@	°F	@	°F
pH	6	@	°F	@	°F	@	°F
Wtr. Loss	10	CC	30 min	CC	30 min	CC	30 min
Rmf	.095	@	70 °F	.07	@	108 °F	@ °F
Rmc		@	°F	@	°F	@	°F
Bit Size	7 7/8						
Laterolog 3	a=	6"	;l=	3'	a=	;l=	
Laterolog 7	a=		;n=		a=	;n=	
Opr. Rig Time	1 1/2 hrs						
Truck No.	2536 PRATT						
Recorded By	MR CARR						
Witness	MR WALLER, ROBINSON						

REMARKS CALIBRATION: BACKGND. SOURCE GALV. INCR. SENS. TAP (FOR CAL.) SENS. TAP (RECORD) TIME RECORDING
 CPS. 408 DIVISIONS 100 (RECORD) 300 SPEED (FT./MIN.) 42
 GAMMA RAY: 80

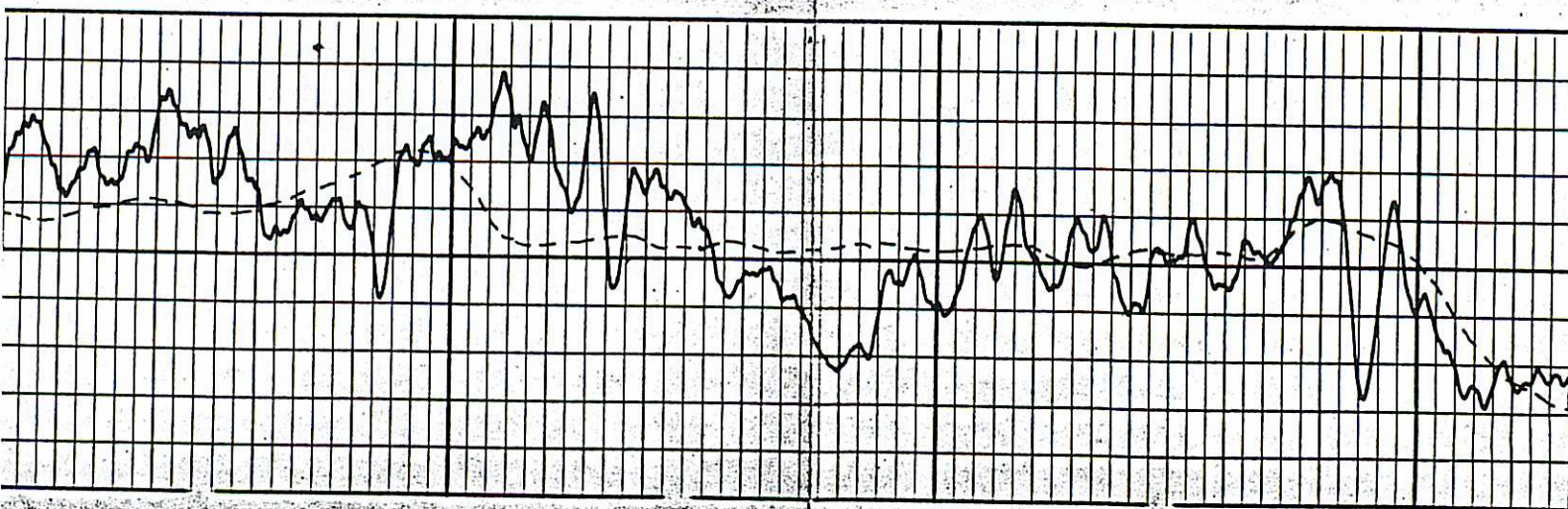


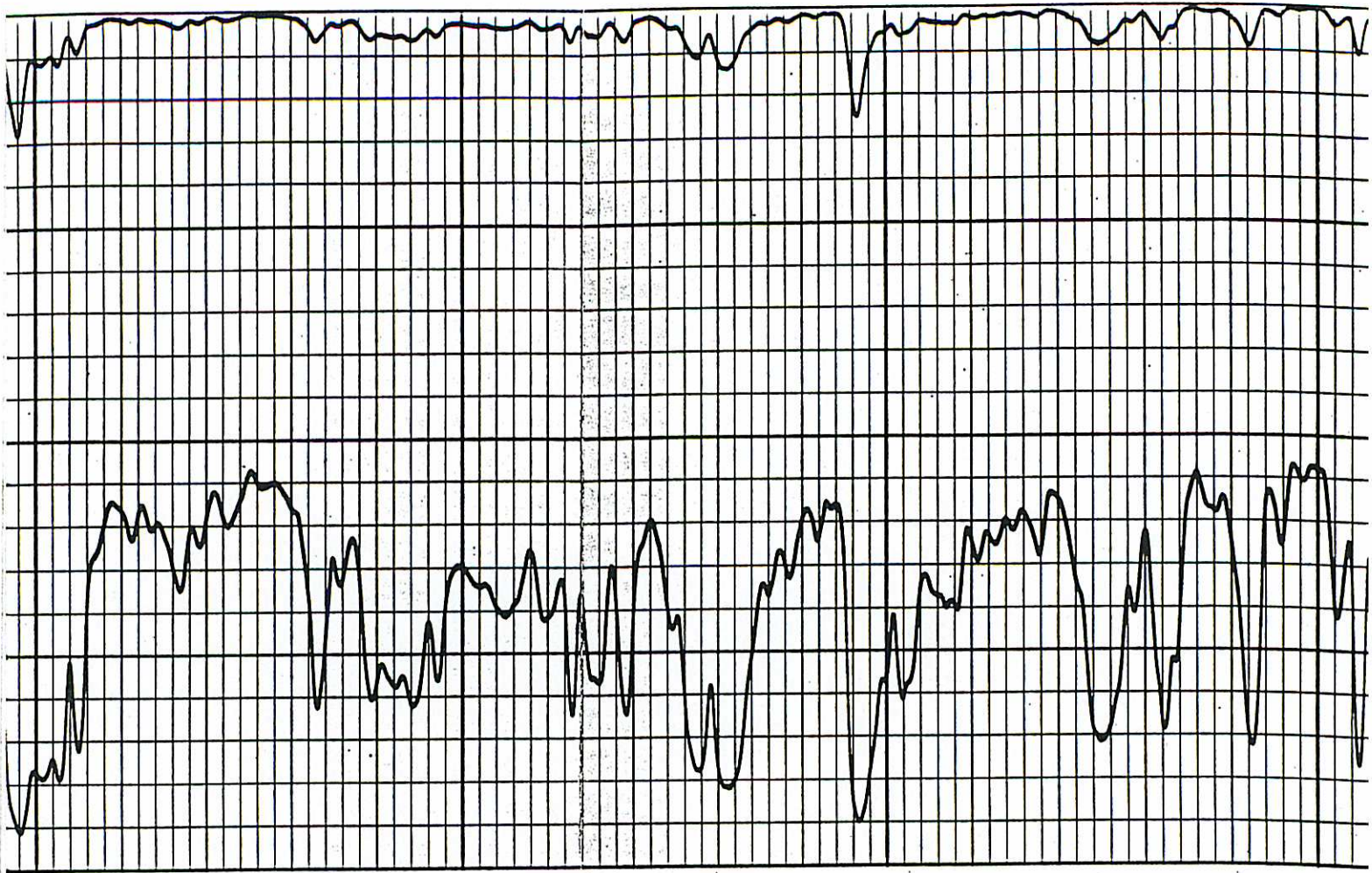
DEPTHS





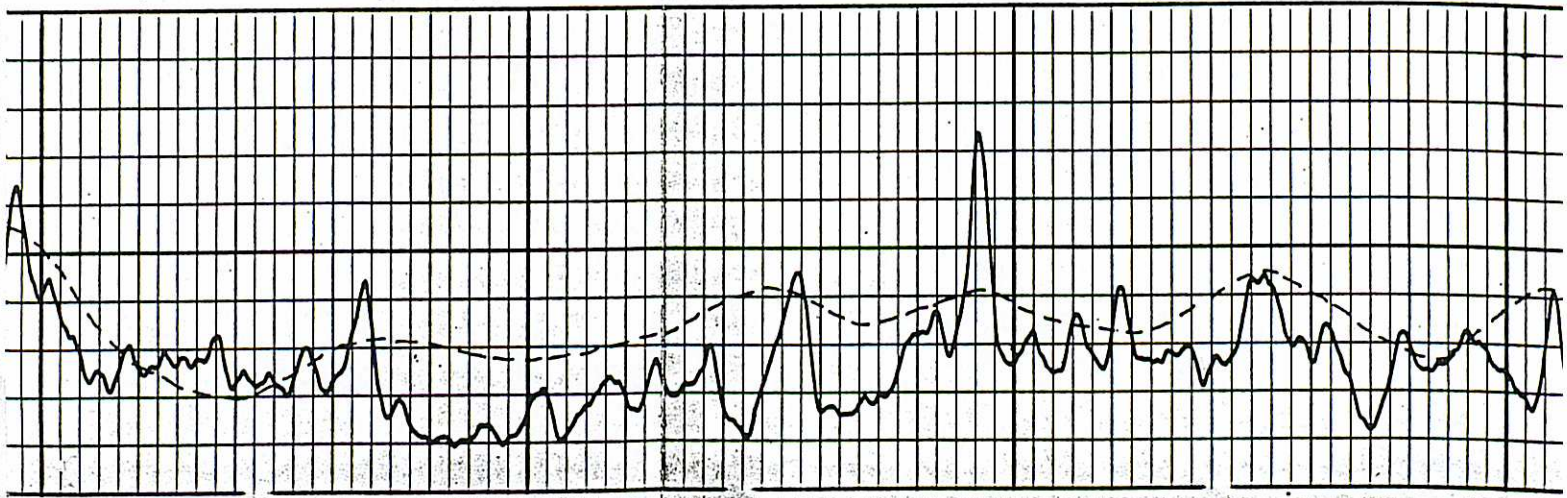
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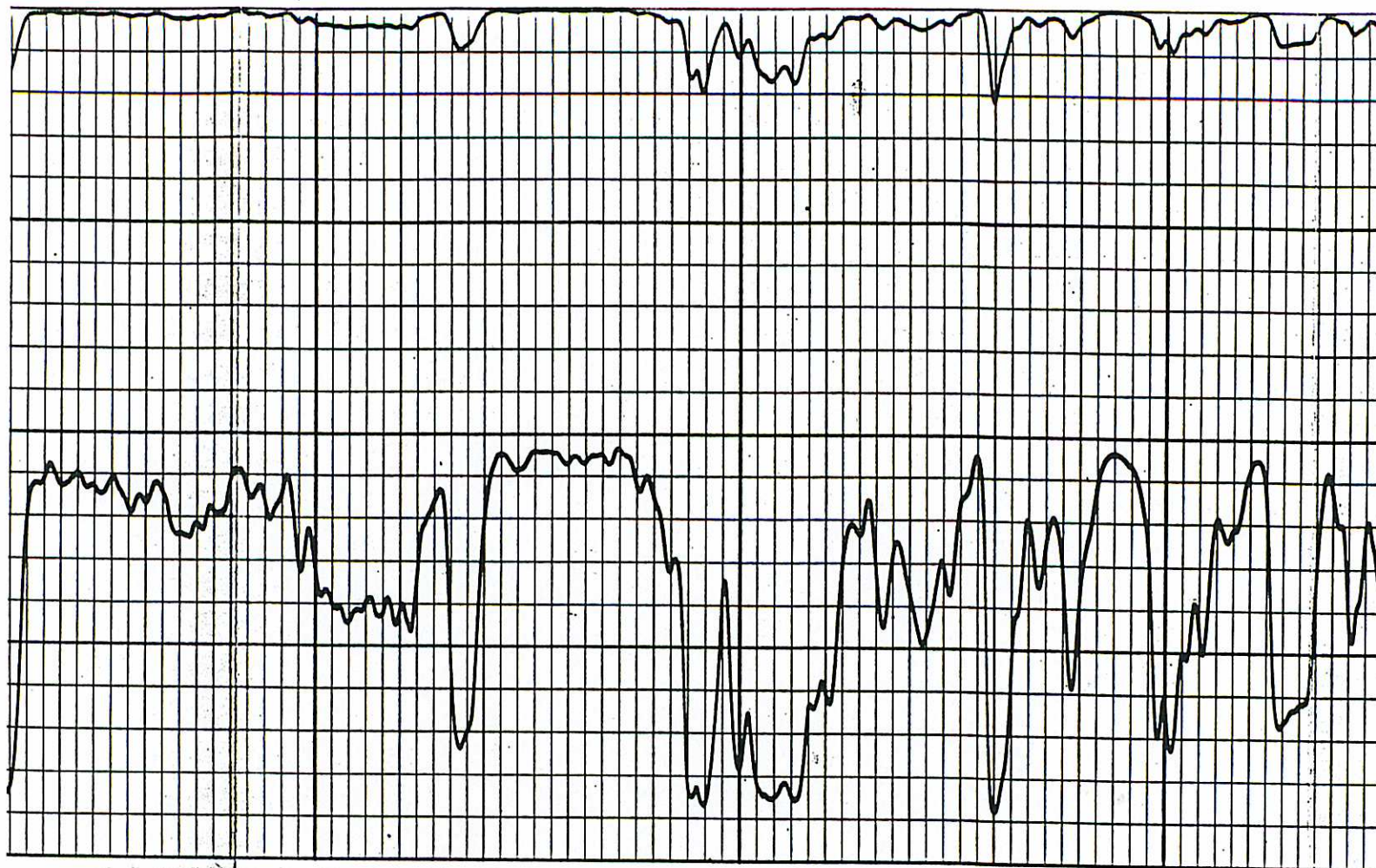




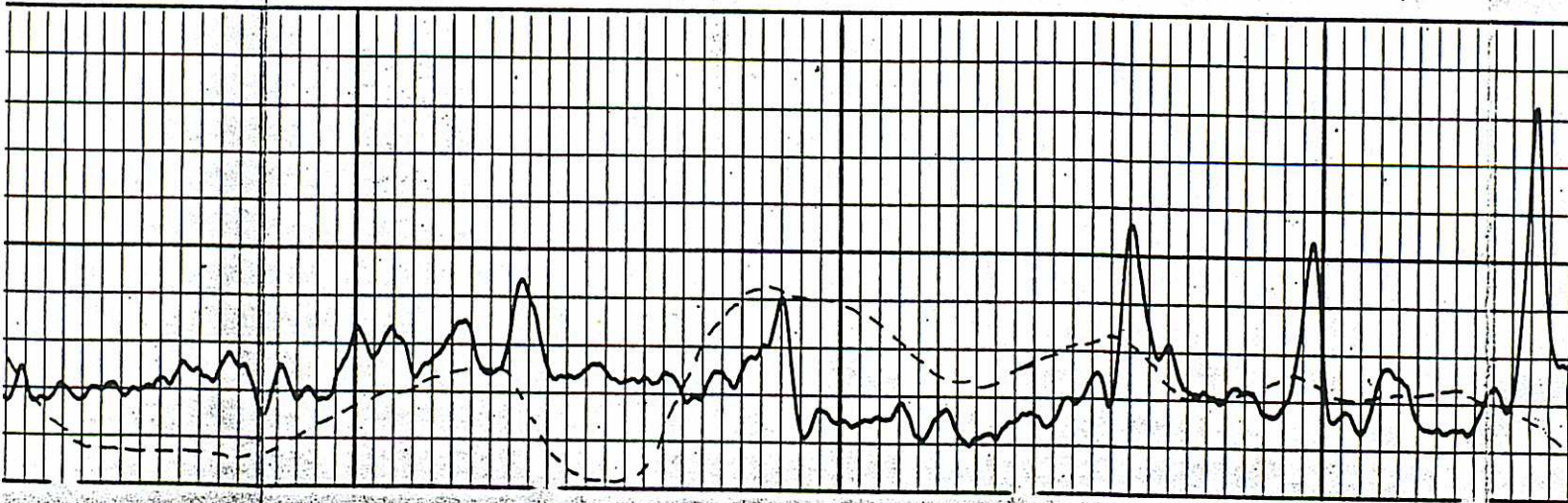
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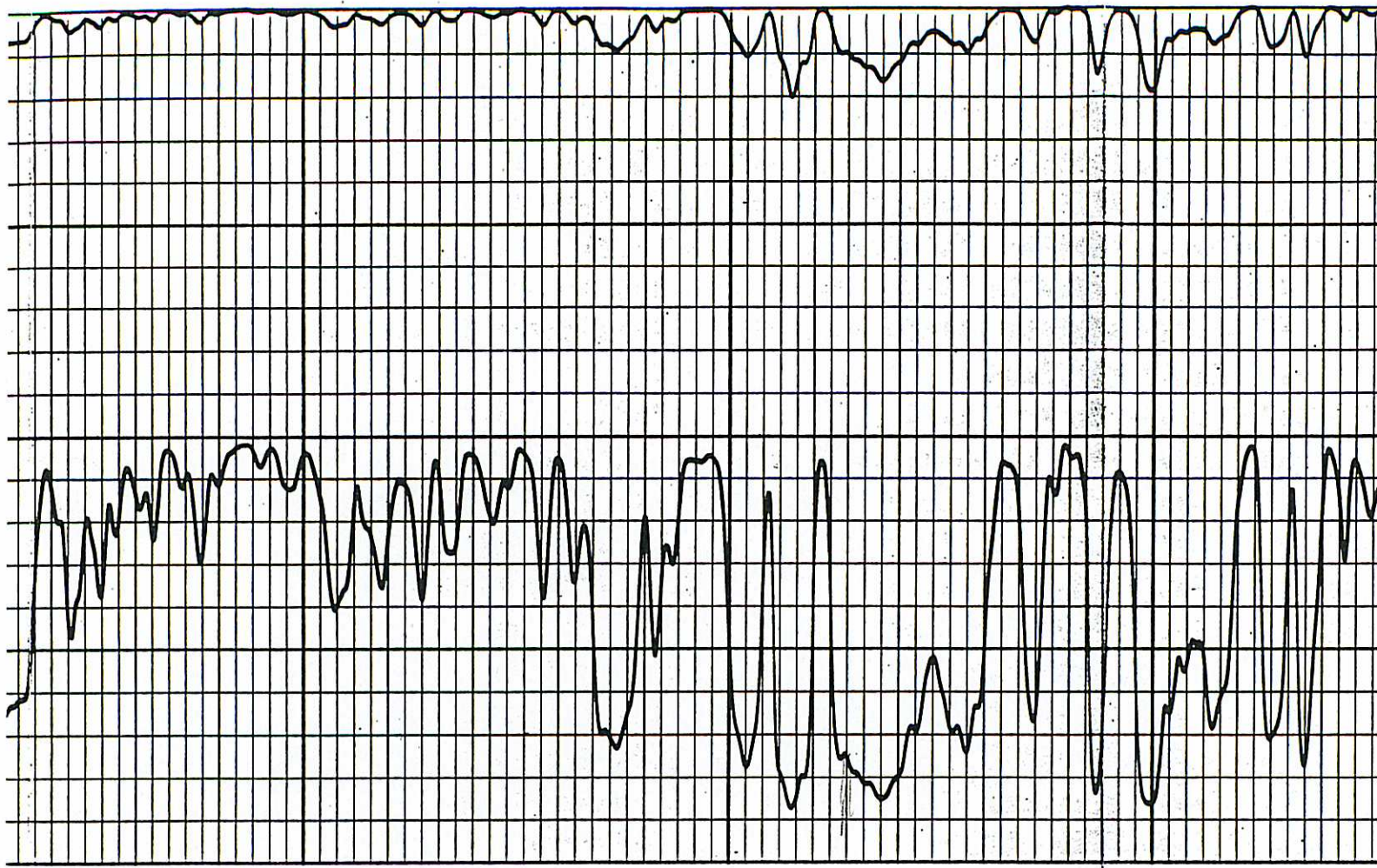
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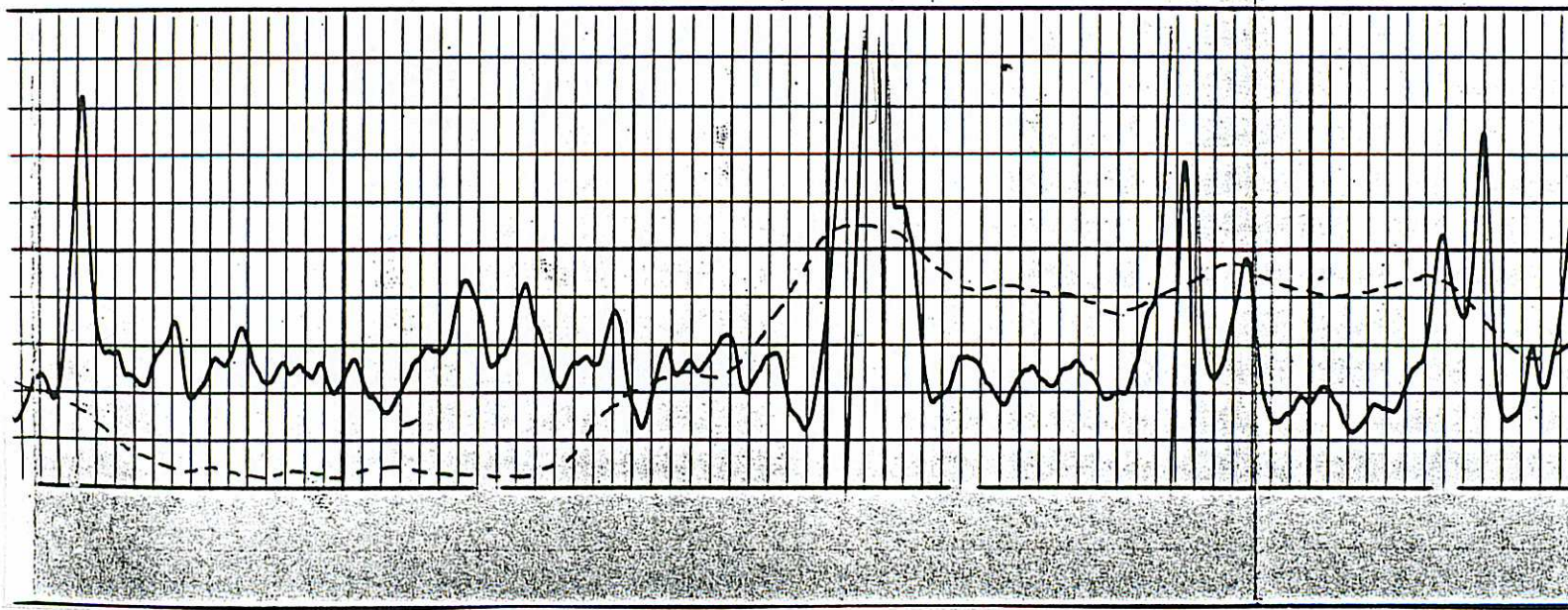
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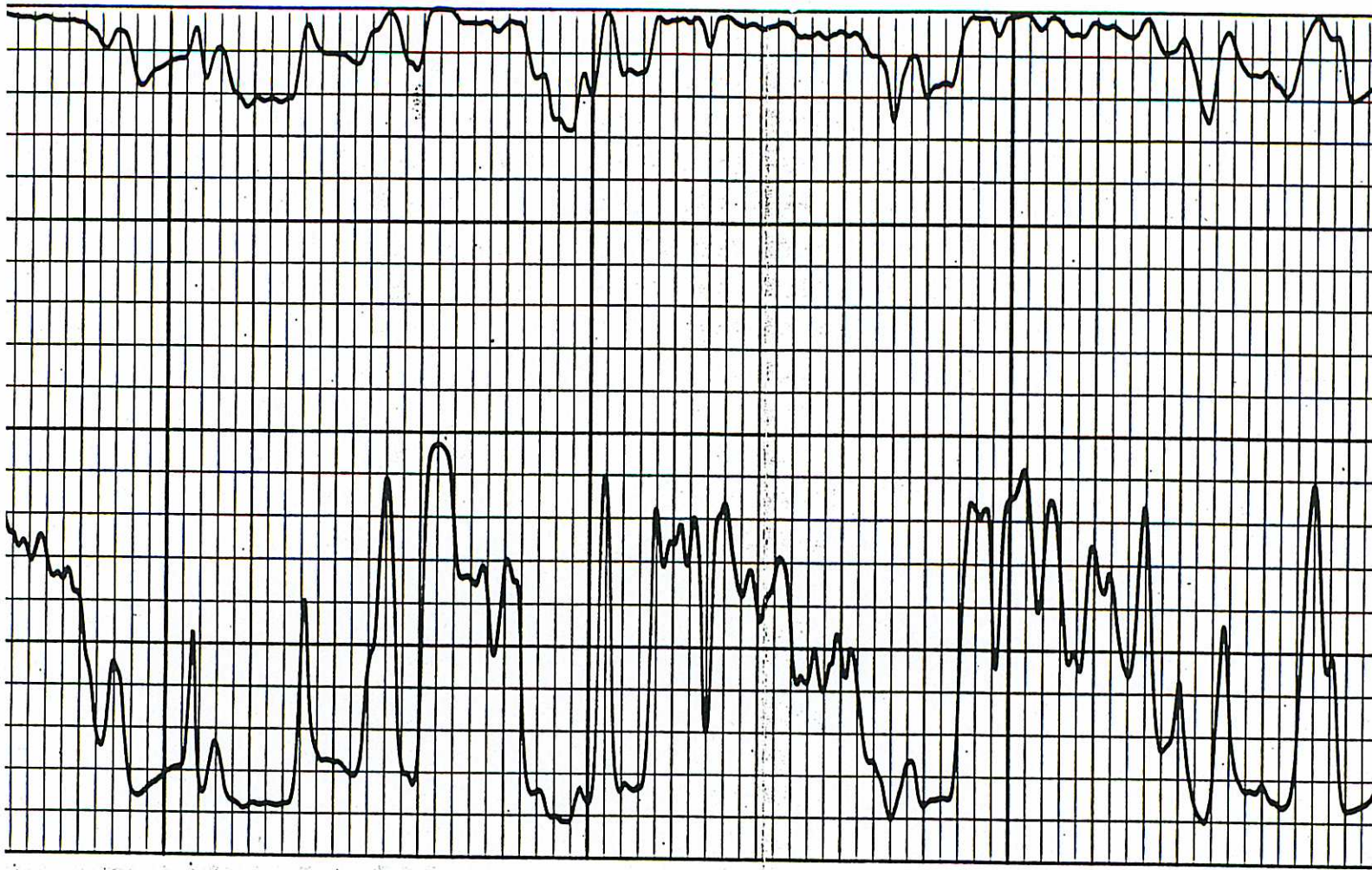




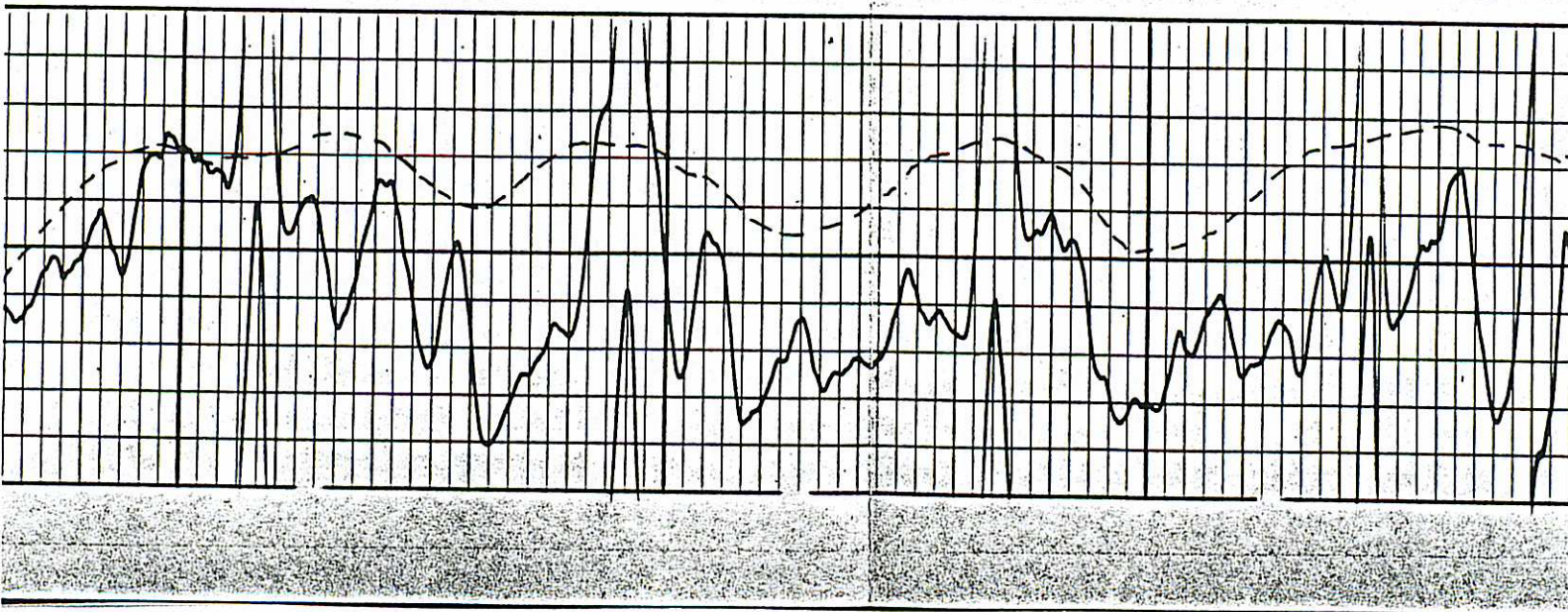
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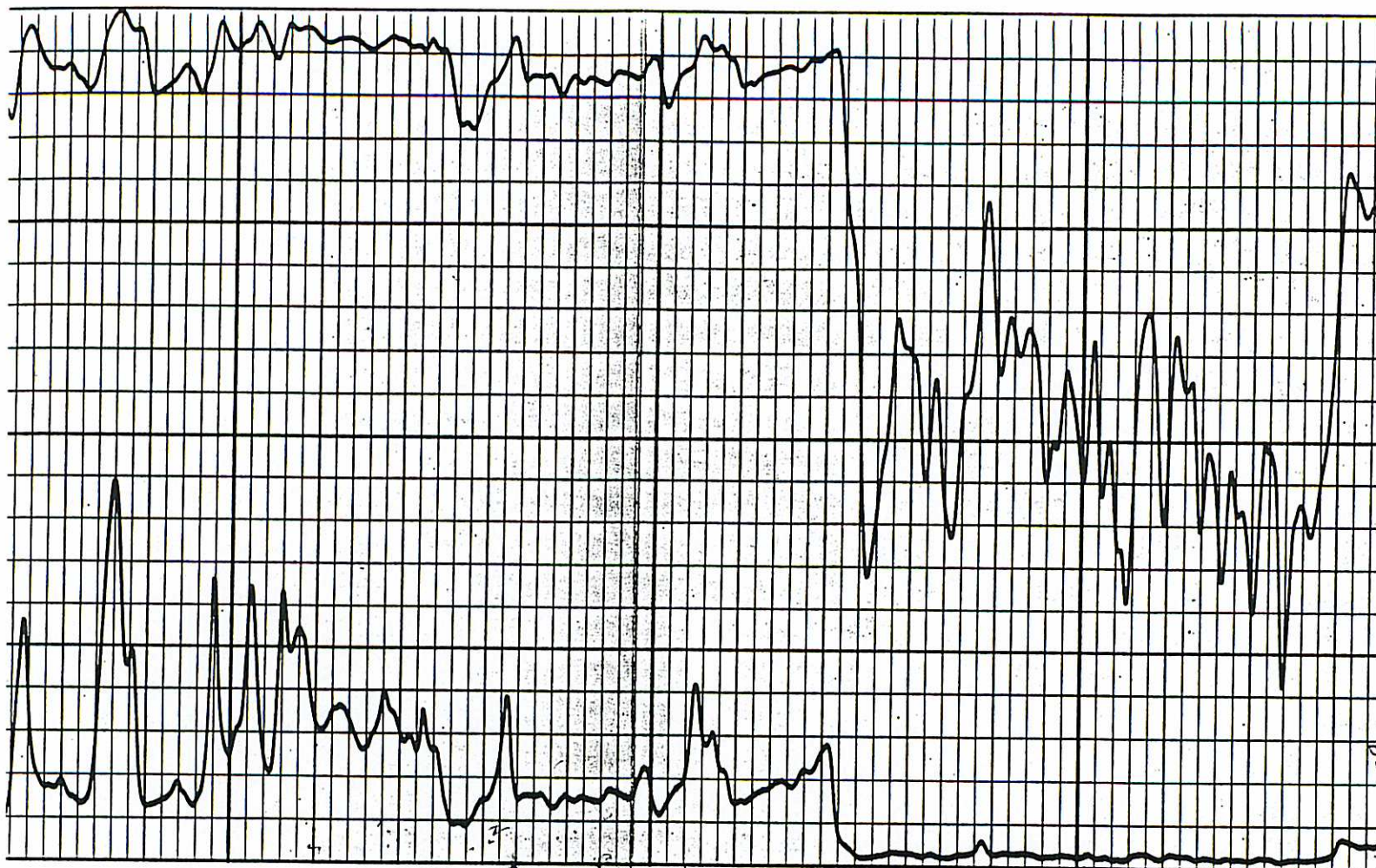
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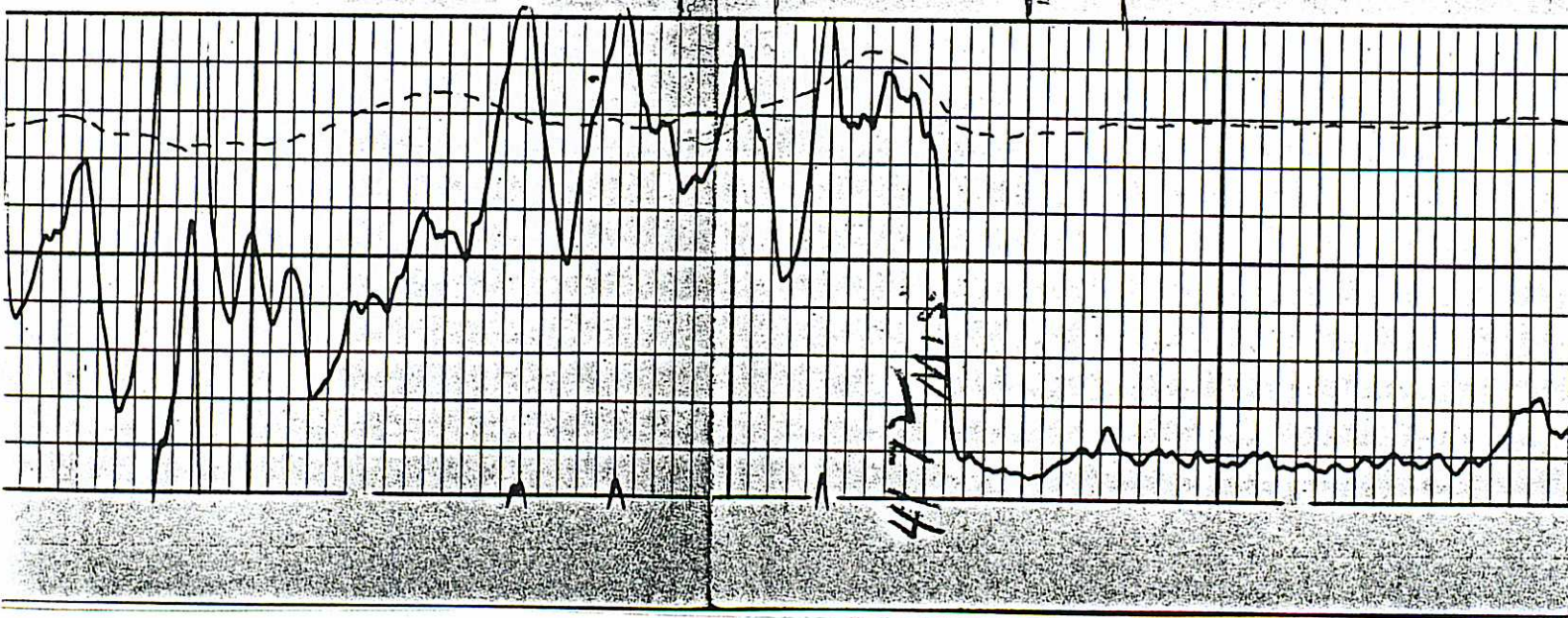
4000





4100

4200



4172

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

June 15, 2012

Gary Adelhardt
Wildcat Oil & Gas LLC
PO BOX 40
SPIVEY, KS 67142-0040

Re: Plugging Application
API 15-095-10029-00-00
POMEROY J G 3
SE/4 Sec.05-30S-08W
Kingman County, Kansas

Dear Gary Adelhardt:

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 December 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 2

(316) 630-4000