



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	Beren Corporation
Well Name	BYRON 1
Doc ID	1093051

Perforations And Bridge Plug Sets

Perforation Top	Perforation Base	Formation	Bridge Plug Depth
4555	4559	Cherokee	
4564	4570	Cherokee	
4599	4610	Mississippi	
4611	4622	Mississippi	

DAILY DRILLING REPORT

PROSPECT Tuttle A YEAR 1980  
Byron WELL NO. 1 WELL LOCATION C SE/4 COUNTY Kiowa STATE KS  
 WELL SITE LEASE DESCRIPTION Sec. 6-27S-16W CODE \_\_\_\_\_  
 OPERATOR Beren Corporation ELEVATION: GR 2101  
 CONTRACTOR Sterling Drilling DF \_\_\_\_\_  
 GEOLOGIST Bob Lewellyn KB 2111  
 DEVELOPMENT WELL \_\_\_\_\_ PROSPECT TEST WELL X NOTIFY Lexicon Resources Corporation  
 OWNERSHIP 1980 Beren Program 633 17th Street  
First of Denver Plaza, Suite 2110  
Denver, Colorado 80202  
 IDENTIFICATION Test Well  
Farm-out from Lexicon

Susan (303) 623-1760

TOPS:	
Base Wellington	2313 (- 202) Brn Lime 4063 (-1952) Ms Ch 4593 (-2482)
Herington	2335 (- 224) Lansing 4079 (-1968) KK Sh 4641 (-2530)
Council Grove	2692 (- 581) BKC 4386 (-2275) KK Sd 4664 (-2553)
Indian Cave Zone	3130 (-1019) Marmaton 4424 (-2313) RTD 4684
Penn	3145 (-1034) Pawnee 4474 (-2363)
Bern	3417 (-1306) FS 4544 (-2433)
Topeka	3585 (-1474) Ch Shale 4556 (-2445)
Heebner	3904 (-1793) +2 Ch Sd 4562 (-2451)

MOVING IN & RIGGING UP December 23, 1980 SPUD 10:00 am on 12/28/80

SET 8 5/8" @ 457' w/ 300 sx 60-40 pozmix, 2% gel, 3% CC. P.D. 6:15 PM 12-28-80.

DATE	DEPTH	DST
12/30/80	2496'	#1 4534 - 4575 (Cher Sd) 30/45/30/90 Strong blow, GTS 2 minutes Gauge on 2" choke: 9010 MCF, 10 min 8600 MCF, 20 min 8600 MCF, 30 min 9010 MCF, 40 min 9400 MCF, 50 min & stable
12/31/80	3100'	
1/1/81	3735'	
1/2/81	4245'	
1/3/81	4575'	
1/4/81	4613'	Rec: No fluid 1561/1561 1086/1199 1076/1199
1/5/81	4633'	#2 4596 - 4613 (Miss) 30/45/120/90 Strong blow throughout Rec: 90' mud 1168/1117 21/42 31/73
1/6/81	4684'	Running Petro-Logs & will run 5 1/2" production casing this PM @ 4683', one foot off bottom.
LOG TOPS:		#3 4613 - 4633 (Miss) 30/45/120/90 Weak blow throughout Rec: 60' mud 931/787 31/31 31/52
Heebner	3910 (-1799) Cher A Sd 4553 (-2442)-4	
BL	4057 (-1946) Cher B Sd 4562 (-2451)-10	
Lansing	4074 (-1963) Miss 4595 (-2484)-42	
BKC	4373 (-2262) KK Sh 4654 (-2543)	
Pawnee	4471 (-2360) KK Sd 4660 (-2549)	#4 4666 - 4684 (Kind Sd) Mis-run, tool wouldn't open.
FS	4538 (-2427) LTD 4683 (-2572)	
Cher Sh	4548 (-2437)	
1/7/81	Ran 155 joints 5 1/2" production casing (4690'). Set at 4683'. Cemented with 250 sx 60-40 pozmix, 10% salt, 3/4 of 1% CFR-2, 10# gil/sx. P.D. 3:45 AM 1-7-81.	#5 4668 - 4684 (Kind Sd) 30/45/30/45 Weak blow 30 minutes Rec: 10' mud 1261/1034 31/31 31/31

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  
Thomas E. Wright, Commissioner  
Shari Feist Albrecht, Commissioner

Sam Brownback, Governor

September 12, 2012

Evan Mayhew  
Beren Corporation  
2020 N. BRAMBLEWOOD  
WICHITA, KS 67206-1094

Re: Plugging Application  
API 15-097-20698-00-00  
BYRON 1  
SE/4 Sec.06-27S-16W  
Kiowa County, Kansas

Dear Evan Mayhew:

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 11, 2013. 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