



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.*

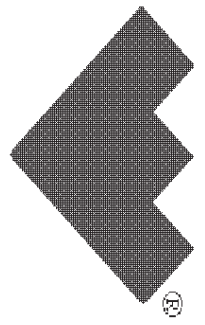
I Submitted Electronically

I

Form	CP1 - Well Plugging Application
Operator	EOG Resources, Inc.
Well Name	Morgan Trust 33 #1
Doc ID	1100318

Perforations And Bridge Plug Sets

Perforation Top	Perforation Base	Formation	Bridge Plug Depth
6194	6212	Lower Morrow	



# Cement Bond Log

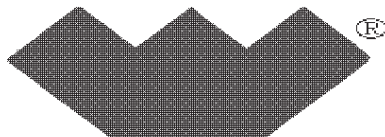
Company EOG RESOURCES Well MORGAN TRUST 33 #1 Field County STEVENS State KANSAS	Company EOG RESOURCES Well MORGAN TRUST 33 #1 Field County STEVENS State KANSAS
Location: API #:	
330' FSL & 550' FWL	
Permanent Datum Log Measured From Drilling Measured From	SEC 33 TWP 33S RGE 38W G.L. K.B. 12' A.G.L. K.B.
Elevation 3213'	
Other Services perf	
Elevation K.B. 3225' D.F. /// G.L. 3213'	
Date 12 AUGUST 2008	
Run Number	ONE
Depth Driller	6748'
Depth Logger	6637'
Bottom Logged Interval	6622'
Top Log Interval	5150'
Open Hole Size	///
Type Fluid	WATER
Density / Viscosity	///
Max. Recorded Temp.	180
Estimated Cement Top	5378'
Time Well Ready	ROA
Time Logger on Bottom	8:30
Equipment Number	14071
Location	LIBERAL, KS
Recorded By	T. WILLIAMS
Witnessed By	MR. TERRY MAXWELL

<<< Fold Here >>>

All interpretations of log data are opinions based on inferences from electrical or other measurements. We do not guarantee the accuracy or correctness of any interpretation or recommendation and shall not 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 employees or agents. These interpretations are also subject to our general terms and conditions set out in our current Price Schedule.

Remarks: LOG CORRELATED TO HLS DUAL NEUTRON LOG  0 corr.	Rig:	Prints:	Service Order #:
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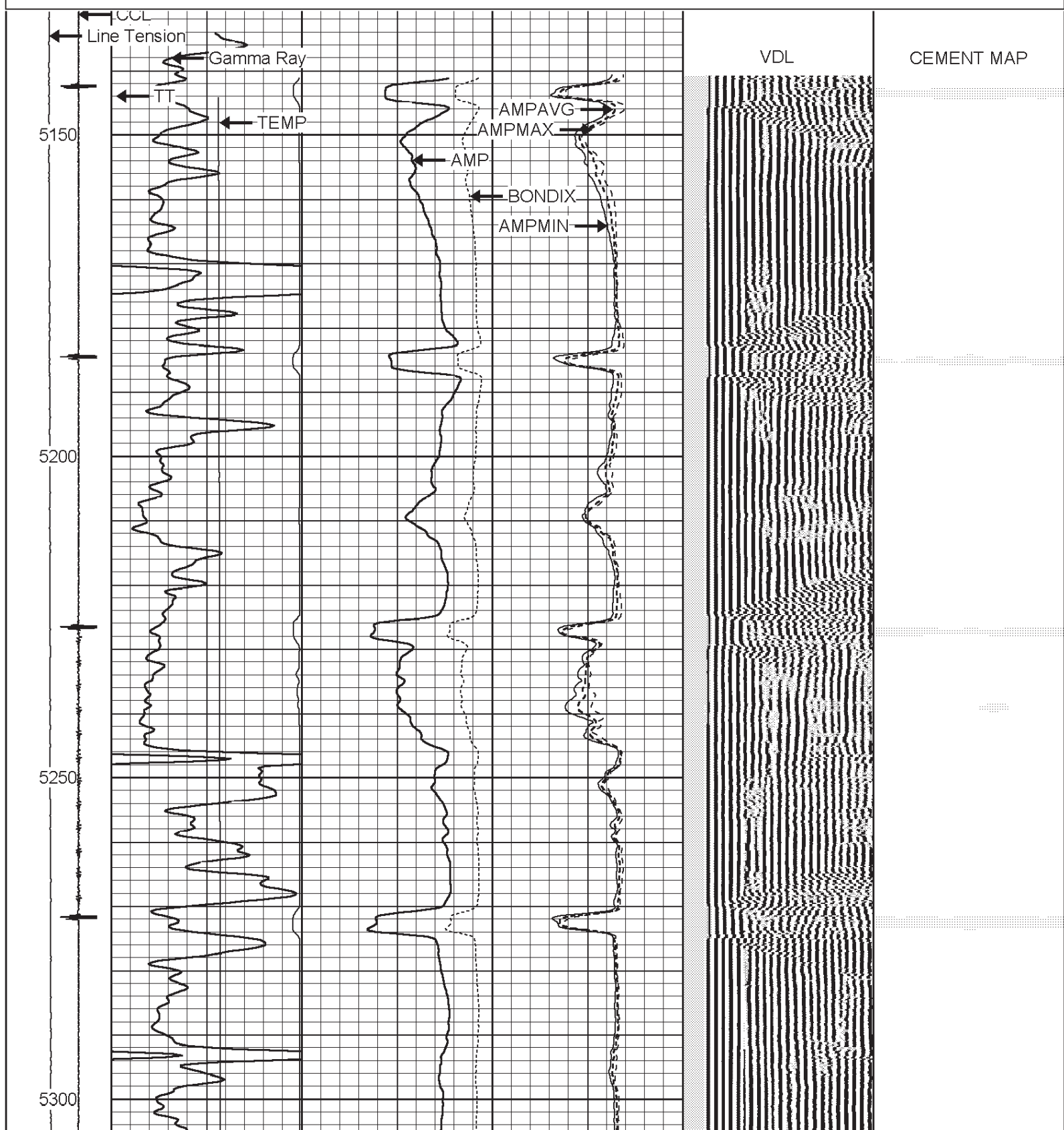
BHT	Bit Size	Surface Pressure	Shut In	EQUIPMENT DATA			
				Run No.	Tool Type	Tool No.	Other



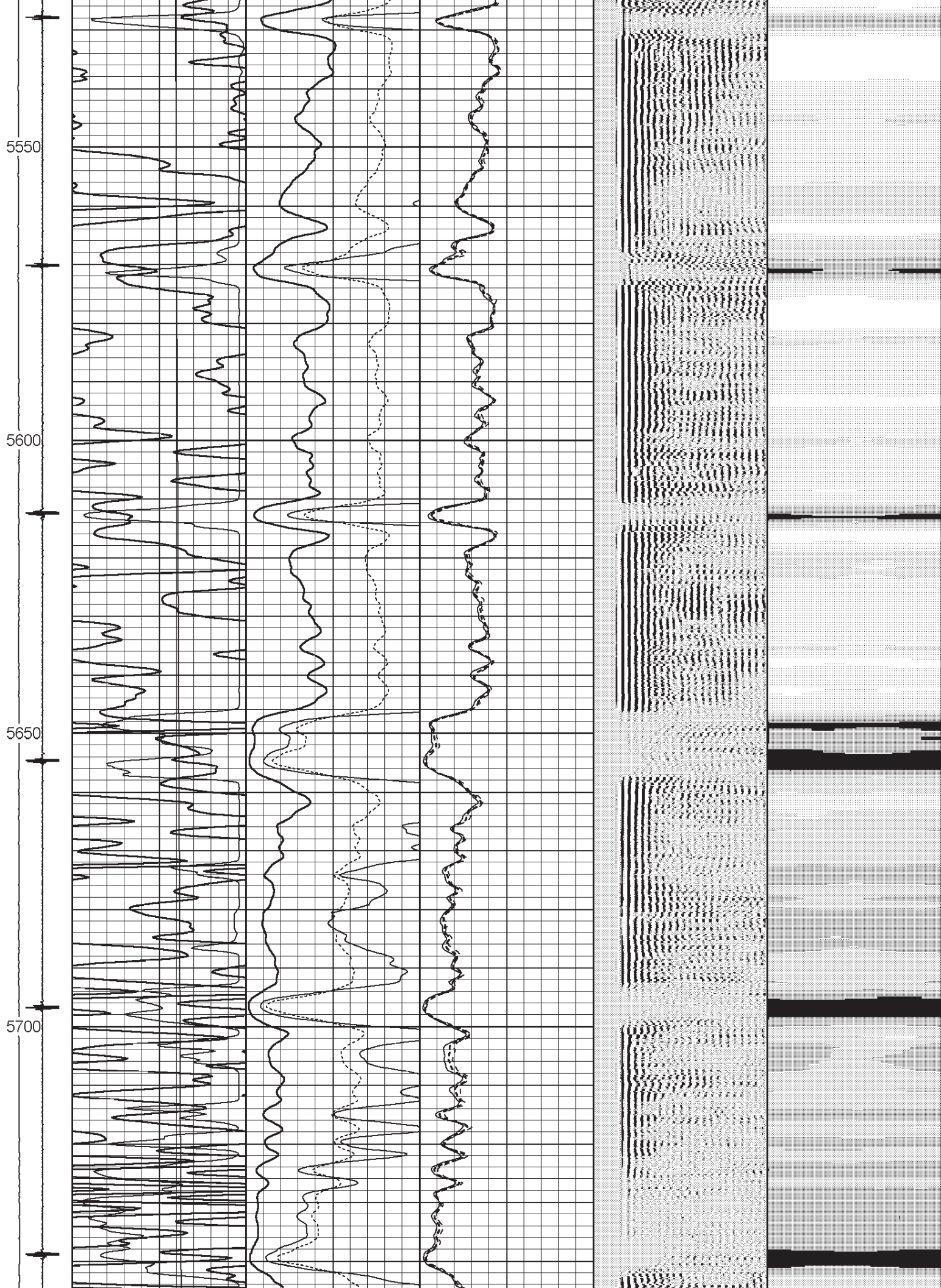
## MAIN LOG

Database File: 150803.db  
 Dataset Pathname: eog/well/rbt/pass14  
 Presentation Format: rbt  
 Dataset Creation: Tue Aug 12 08:51:05 2008 by Log Std Casedhole 07122  
 Charted by: Depth in Feet scaled 1:240

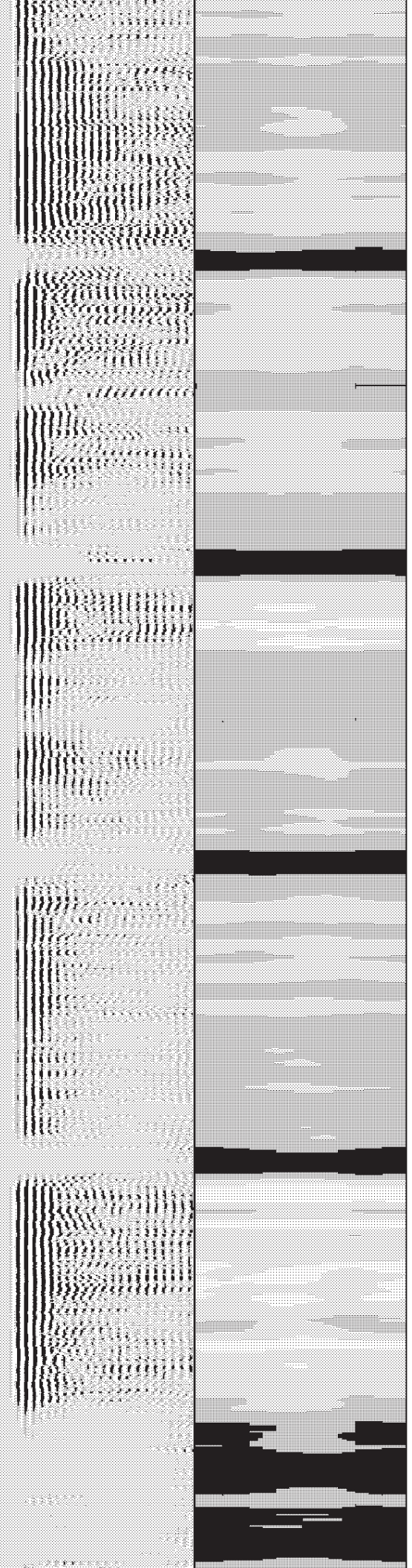
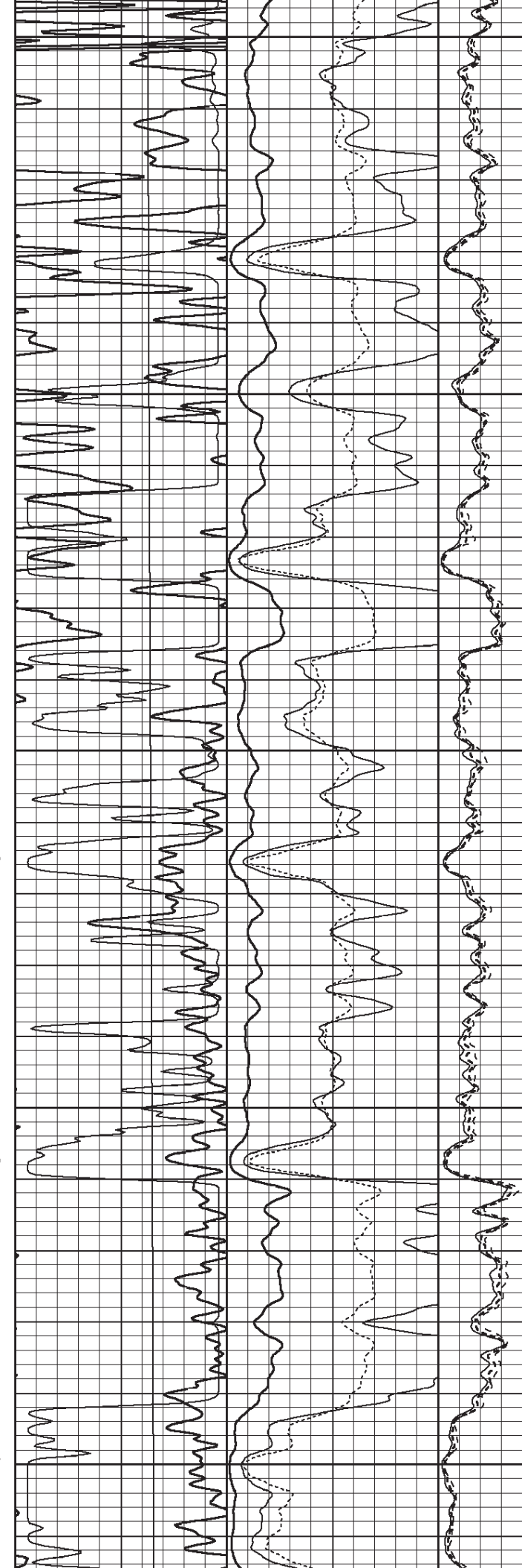
-20 CCL	20	1500 TT (usec)	200	0	AMP (mV)	100	0	AMPAVG	150	200	VDL	1200	1	CEMENT MAP	8
LTEN	0	GR (GAPI)	150	1	BONDIX	0	0	AMPMAX	150				10		60
0 (lb)2000	0	TEMP (degF)	250	0	AMPx5 (mV)	20	0	AMPMIN	150						







5750  
5800  
5850  
5900  
5950



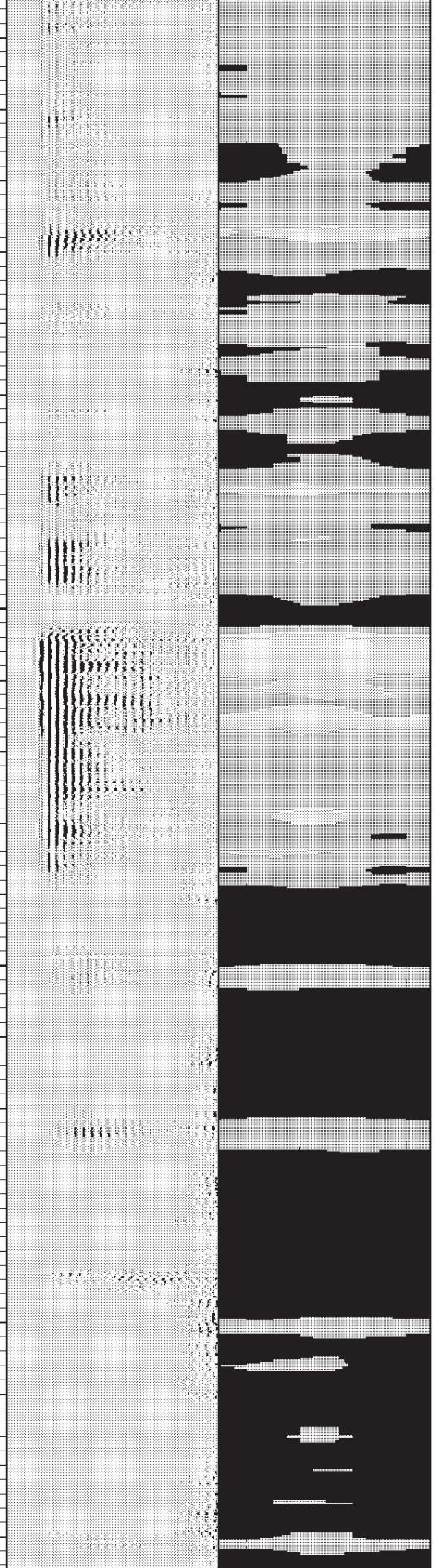
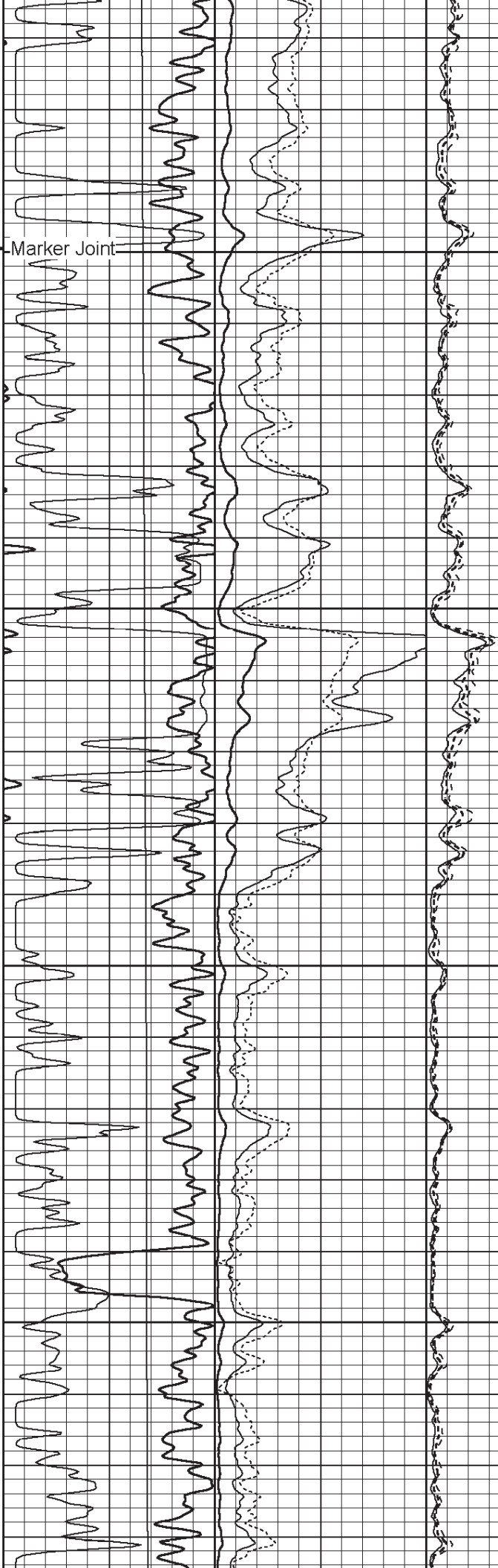


6000 ← Marker Joint

6050

6100

6150



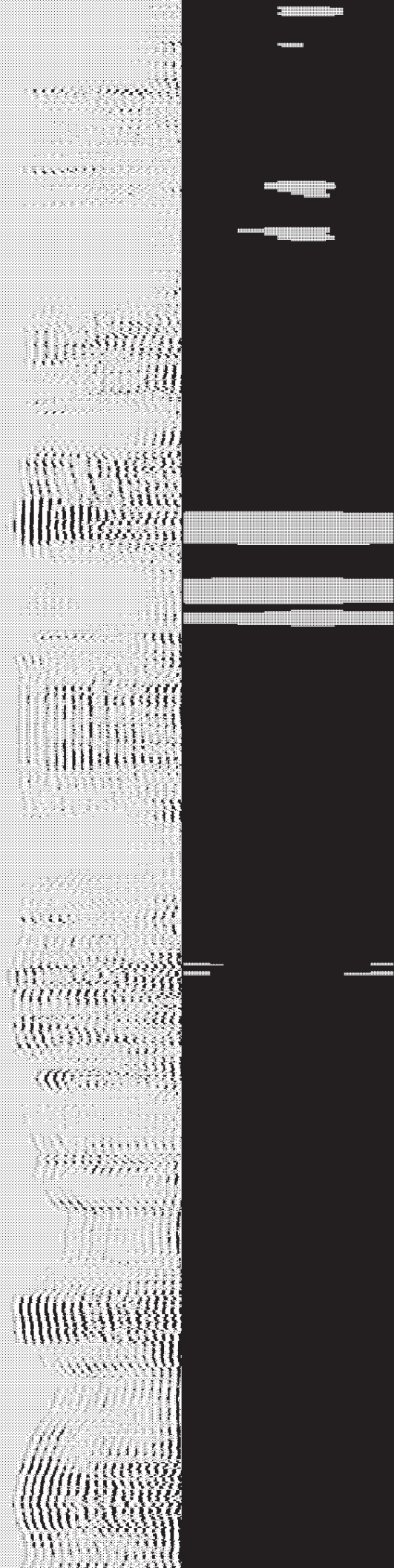
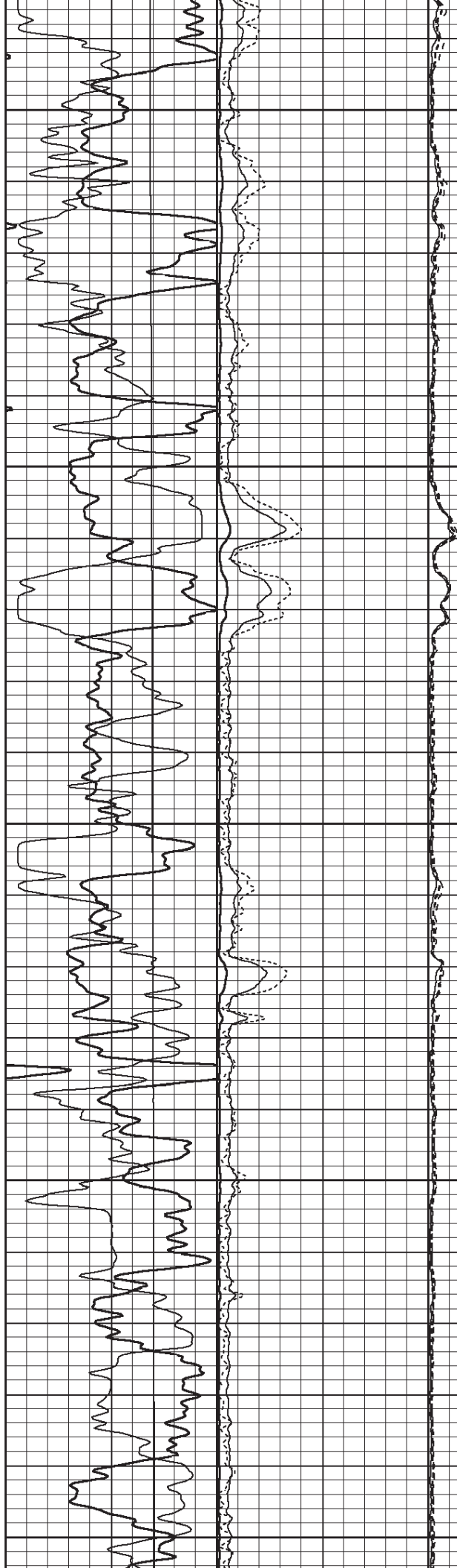
6200

6250

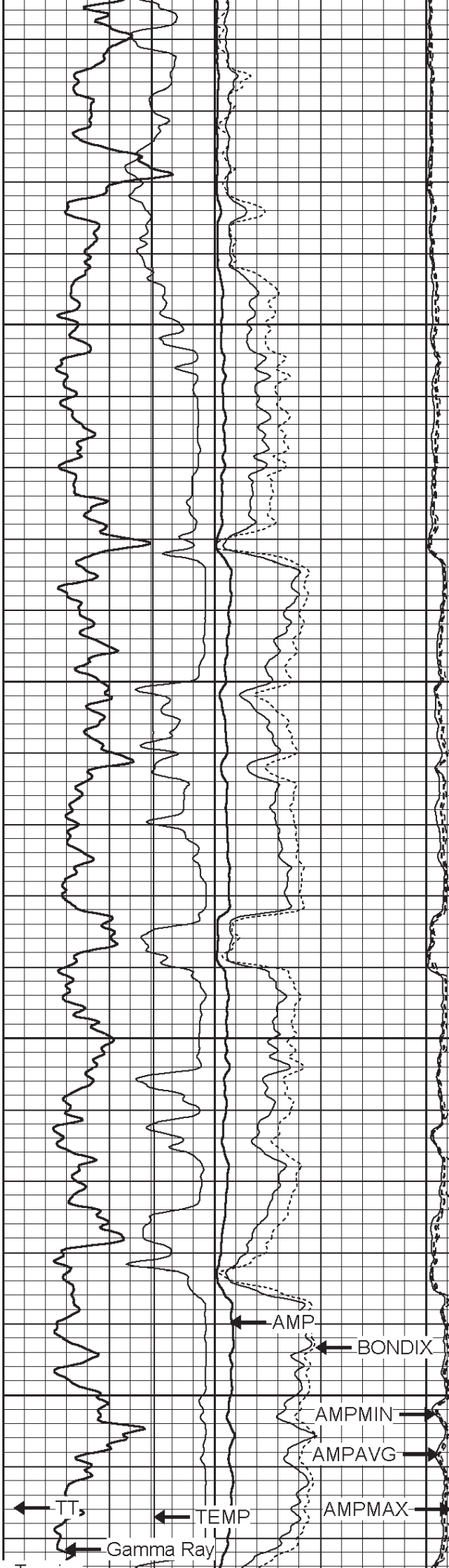
6300

6350

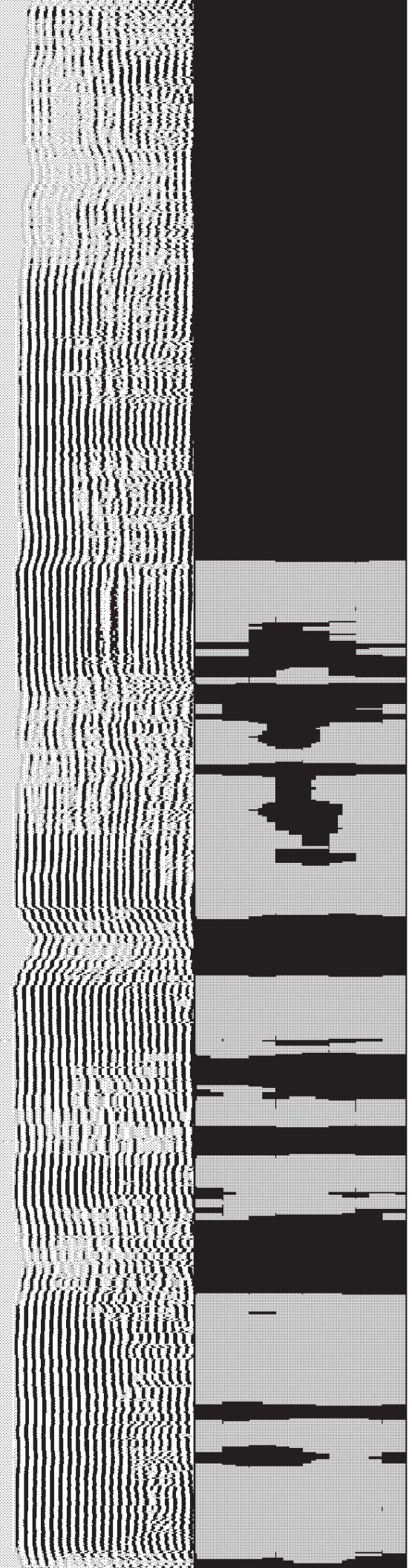
6400

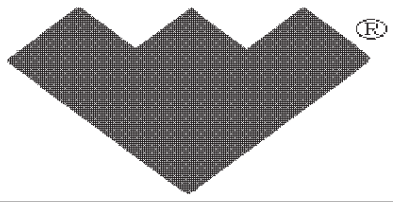
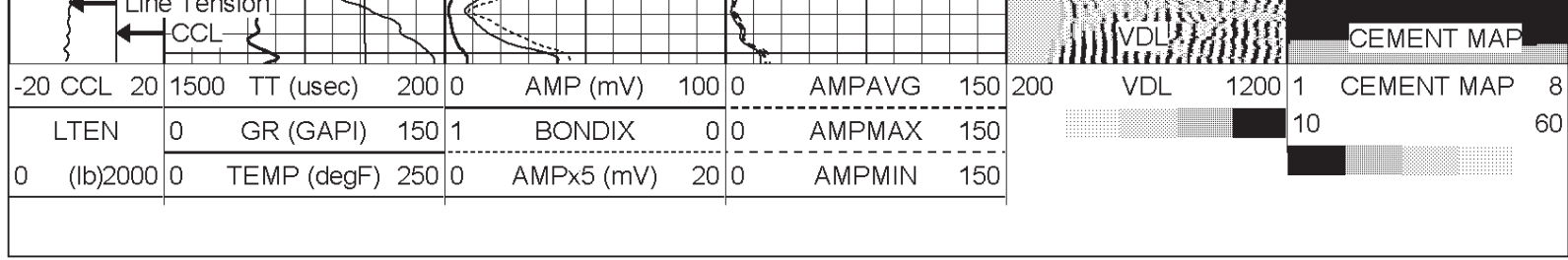


6450  
6500  
6550  
6600



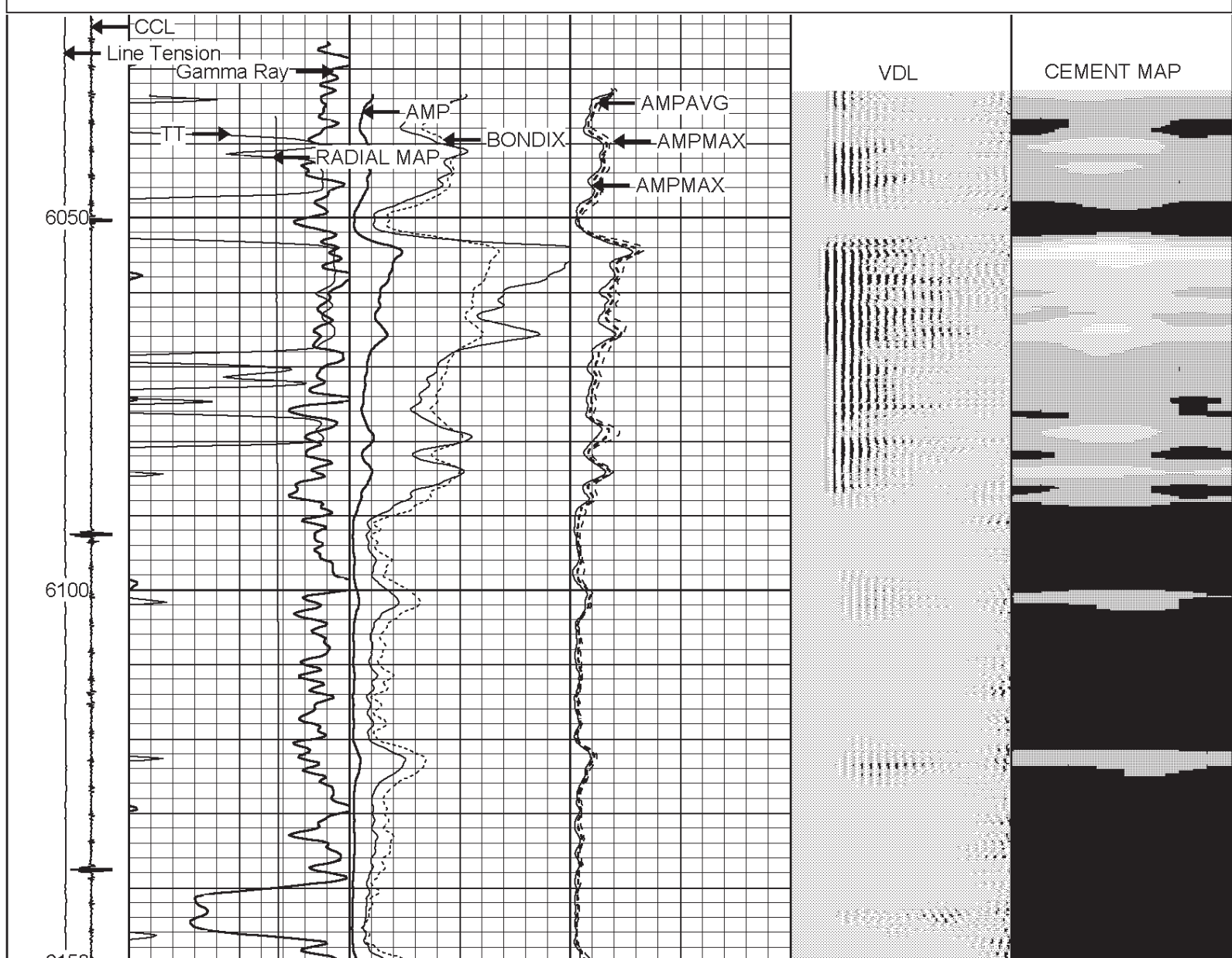
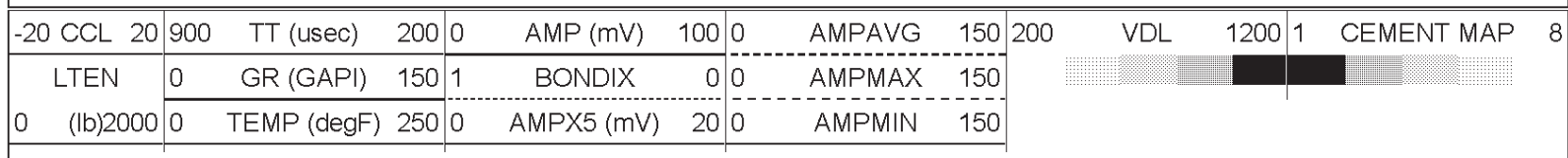
AMP  
BONDIX  
AMPMIN  
AMPAVG  
AMPMAX  
TT  
TEMP  
Gamma Ray

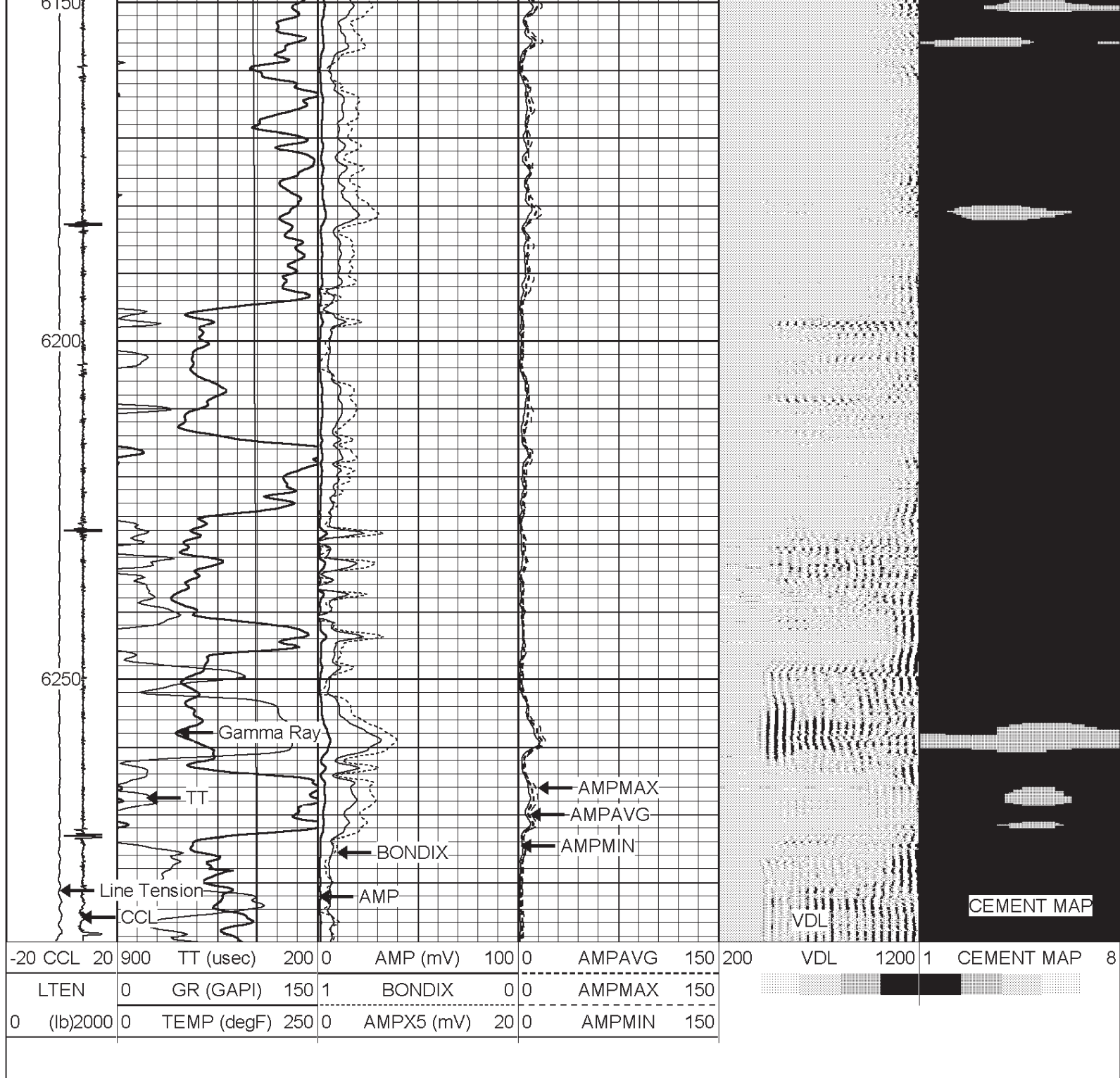




# REPEAT SECTION

Database File: 150803.db  
 Dataset Pathname: eog/well/rbt/pass13  
 Presentation Format: rbt  
 Dataset Creation: Tue Aug 12 08:37:46 2008 by Log Std Casedhole 07122  
 Charted by: Depth in Feet scaled 1:240





Sensor	Offset (ft)	Schematic	Description	Len (ft)	OD (in)	Wt (lb)
			Weatherford	1.03	1.44	
			2.7CSSCent 2 3/4" CSS Adjustable Centralizer	2.88	2.75	25.00
CCL	0.00					



Performed: Tue Aug 12 08:38:06 2008  
 Calibrator Value: 1.0 GAPI  
 Background Reading: 0.0  
 Calibrator Reading: 1.0  
 Sensitivity: 1.5000 GAPI/

Segmented Cement Bond Log Calibration Report

Serial Number: SCBT3\_1J-XXXX  
 Tool Model: SCBT3.1J  
 Performed: Tue Aug 12 08:32:43 2008  
 Depth: 5323.350 ft  
 Casing Diameter: 4.500 in

	References (mv)		Readings (v)		Results	
	Zero	Reference	Zero	Reference	m	b
3'	1.000	81.196	0.005	0.411	197.548	0.040
5'	1.000	81.196	0.004	0.340	238.637	-0.031
S1	0.000	100.000	0.005	0.504	200.112	-0.940
S2	0.000	100.000	0.004	0.506	199.261	-0.827
S3	0.000	100.000	0.004	0.566	178.006	-0.793
S4	0.000	100.000	0.005	0.613	164.511	-0.807
S5	0.000	100.000	0.006	0.595	169.821	-0.989
S6	0.000	100.000	0.005	0.549	183.739	-0.917
S7	0.000	100.000	0.005	0.515	196.164	-1.008
S8	0.000	100.000	0.005	0.495	204.401	-1.110

Temperature Calibration Report

Serial Number: SCBT3\_1J-XXXX  
 Tool Model: SCBT3.1J  
 Performed: Sat Aug 09 07:11:11 2008

	Reference	Reading
Low Reference:	79.00 degF	2483.20
High Reference:	122.00 degF	4593.60
Gain:	0.02	
Offset:	28.40	
Delta Spacing	1	

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

November 08, 2012

Bev Christensen  
EOG Resources, Inc.  
3817 NW EXPRESSWAY STE 500  
OKLAHOMA CITY, OK 73112-1483

Re: Plugging Application  
API 15-189-22661-00-00  
Morgan Trust 33 #1  
SW/4 Sec.33-33S-38W  
Stevens County, Kansas

Dear Bev Christensen:

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, 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