



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

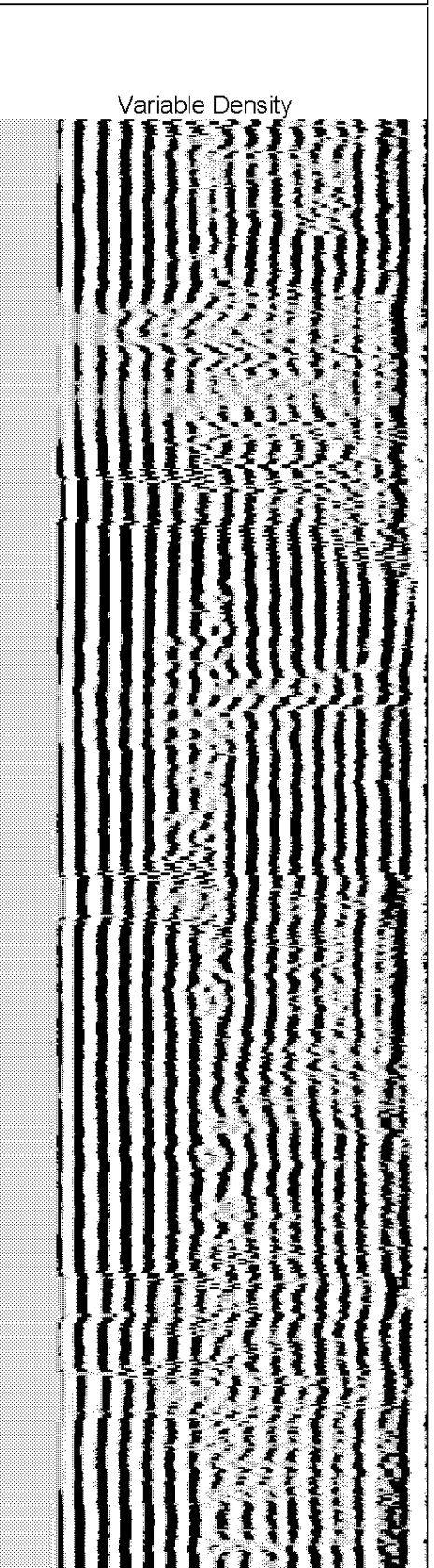
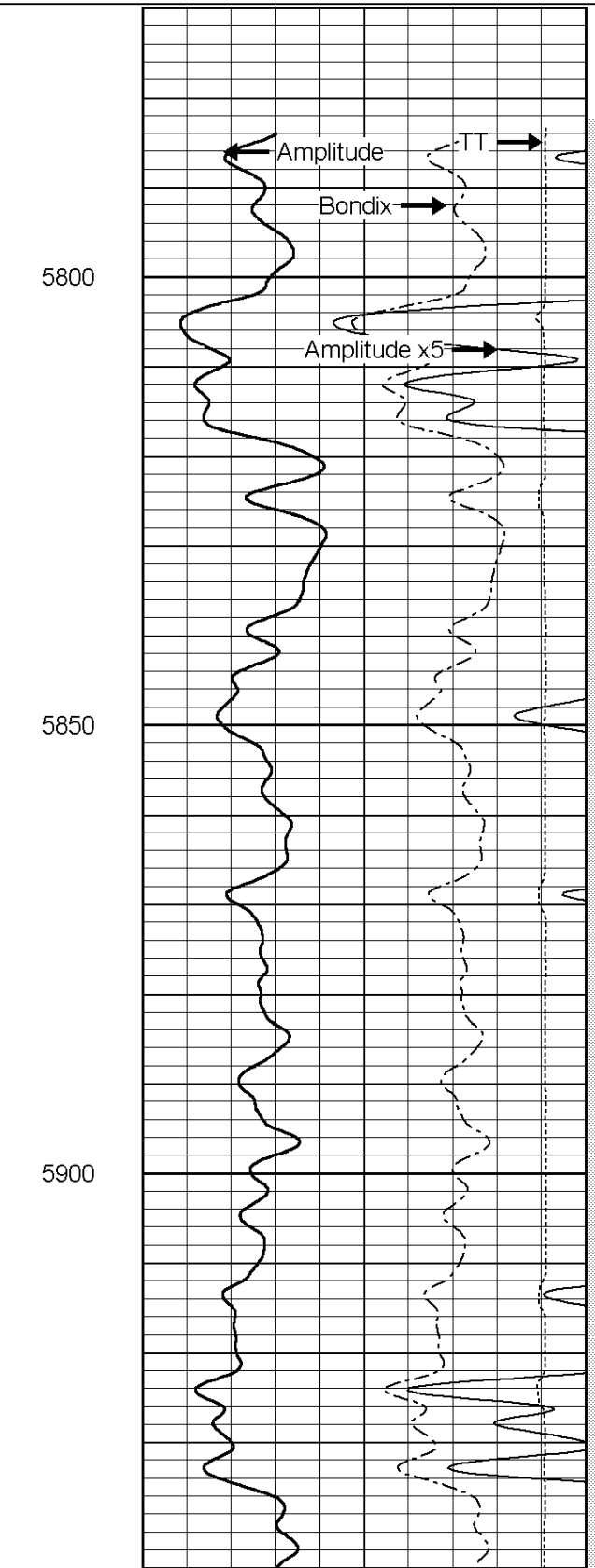
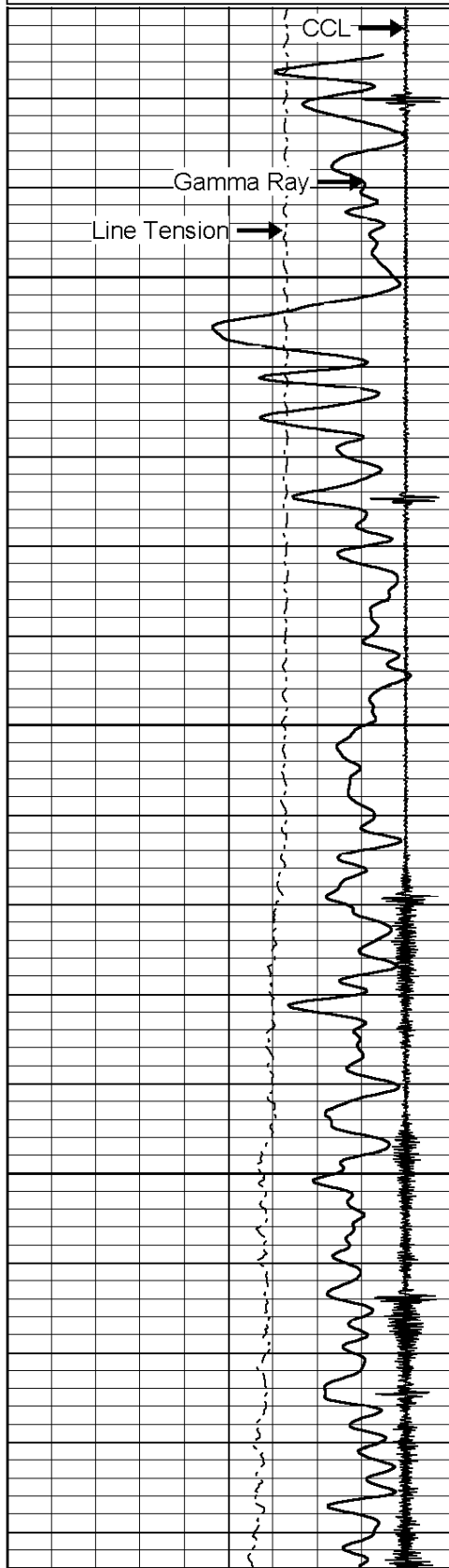
Form	CP1 - Well Plugging Application
Operator	EOG Resources, Inc.
Well Name	BANE 28 #1
Doc ID	1100320

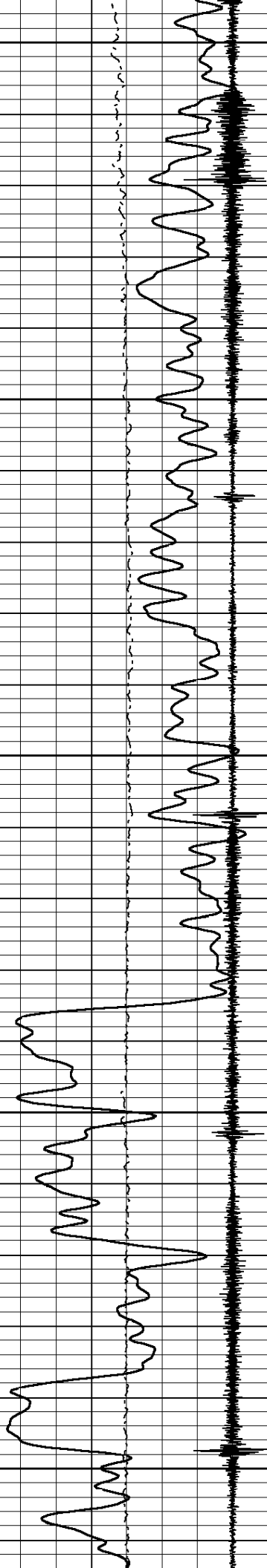
Perforations And Bridge Plug Sets

Perforation Top	Perforation Base	Formation	Bridge Plug Depth
6530	6536	St. Louis	

Database File: 155946.db
 Dataset Pathname: eog/well/cbl2/pass10
 Presentation Format: cblcr_ws
 Dataset Creation: Thu Feb 12 14:44:14 2009 by Log Std Casedhole 07122
 Charted by: Depth in Feet scaled 1:240

-9	CCL	1	0	Amplitude x5 (mV)	20	200	Variable Density	1200
0	Gamma Ray (GAPI)	150	0	Amplitude (mV)	100			
2500	Line Tension (lb)	0	1	Bondix	0			
			700	TT (usec)	200			





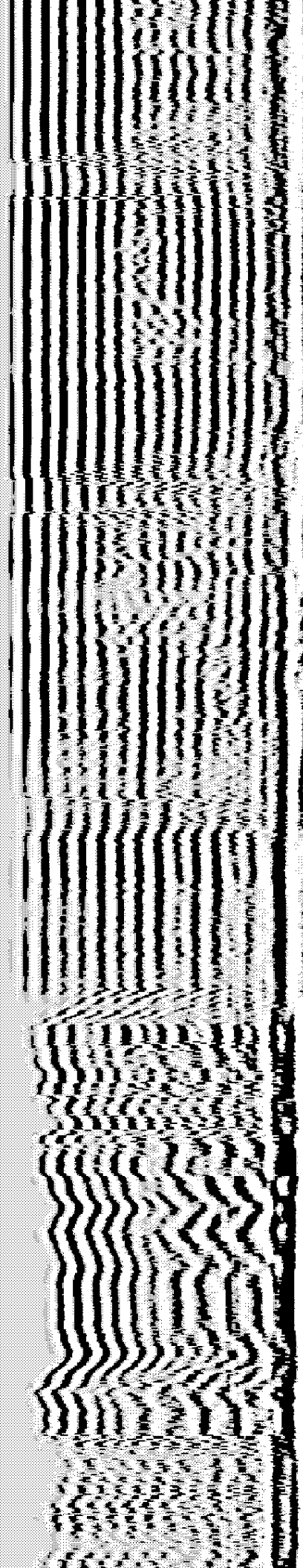
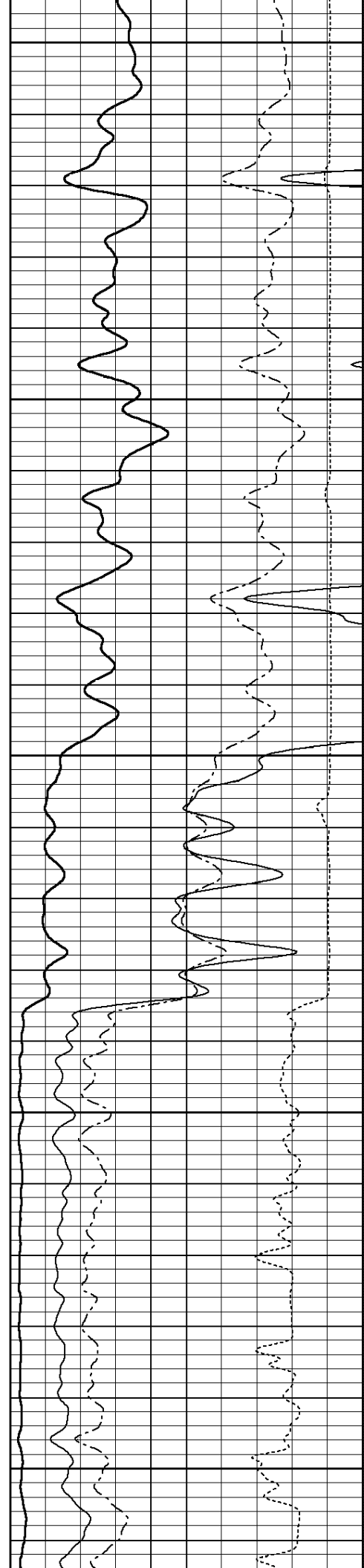
5950

6000

6050

6100

6150



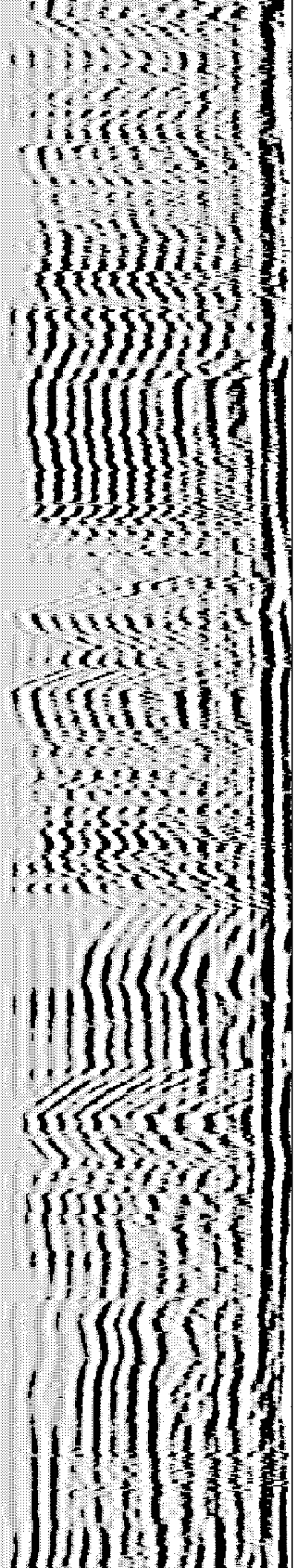
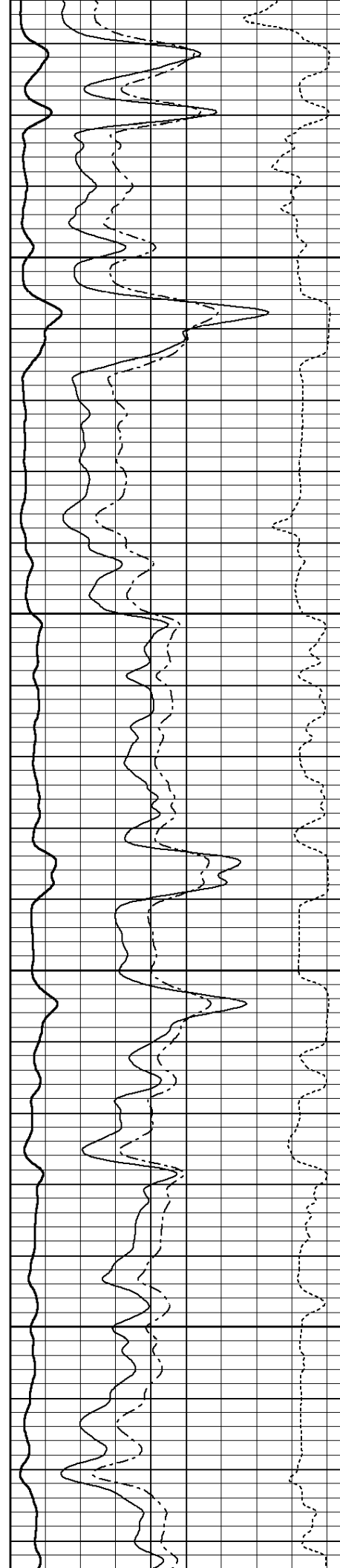


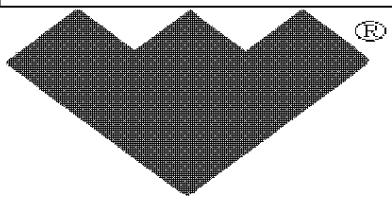
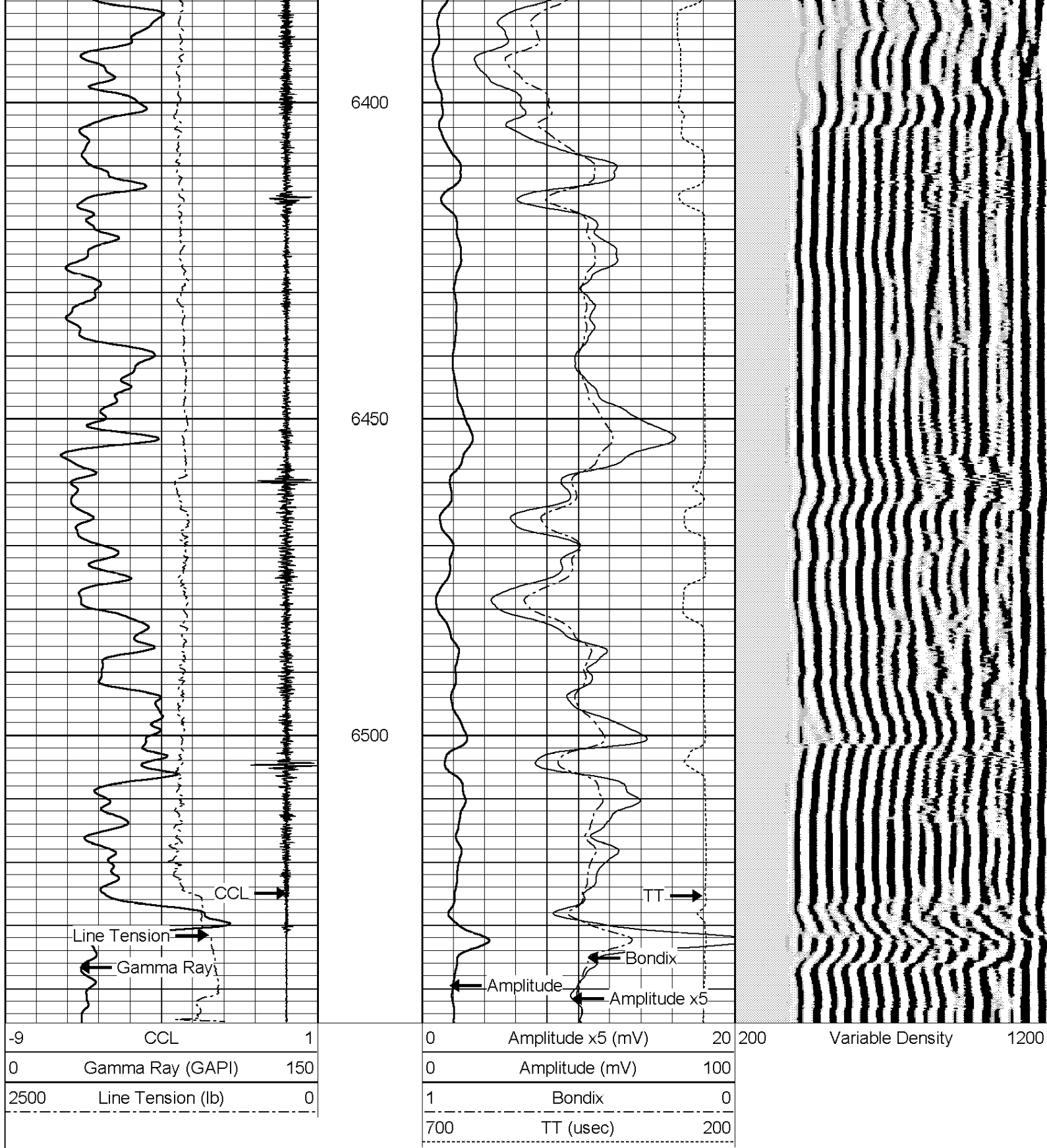
6200

6250

6300

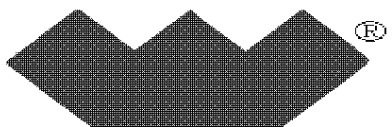
6350





MAIN LOG

1000 PSI

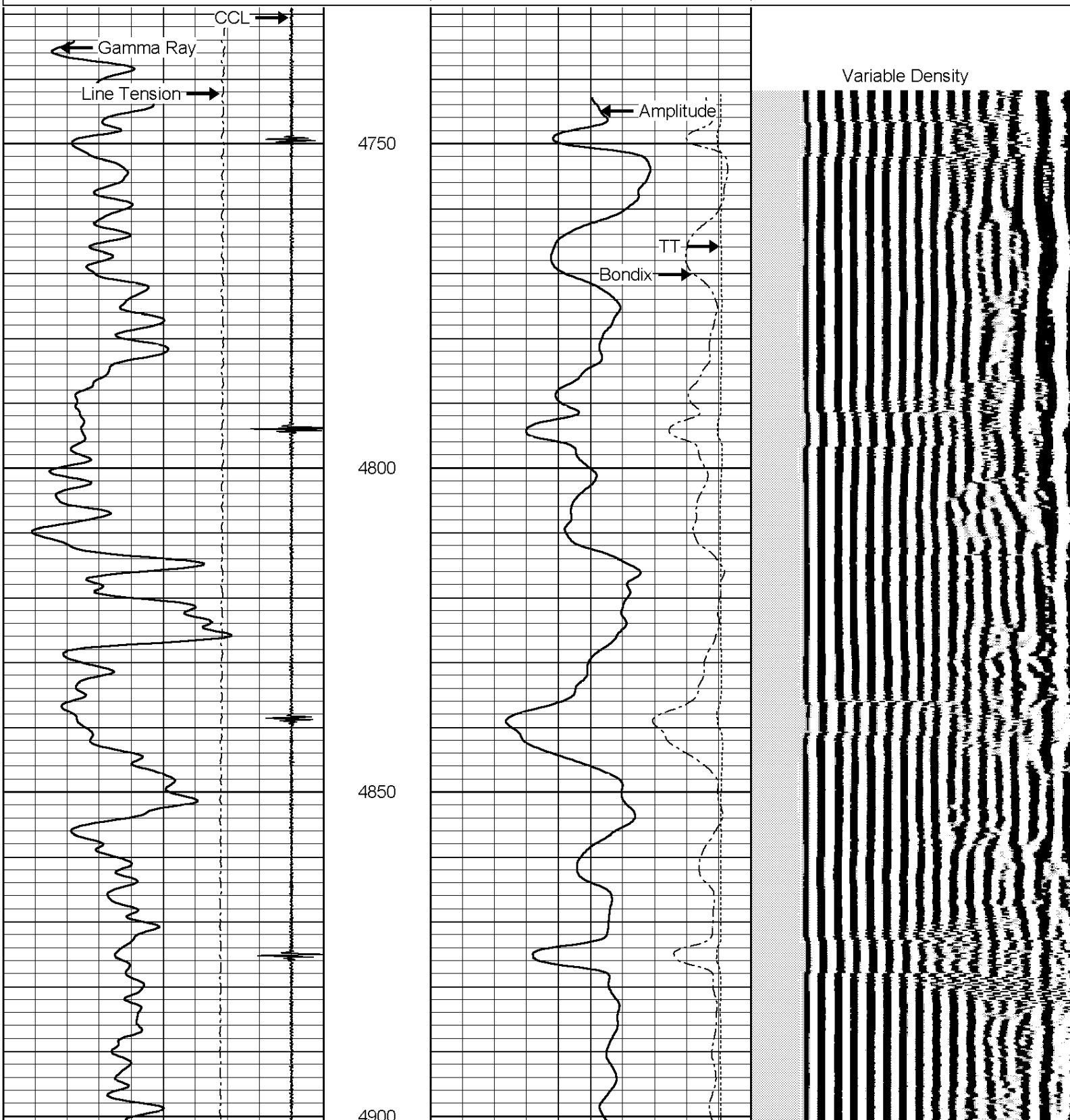


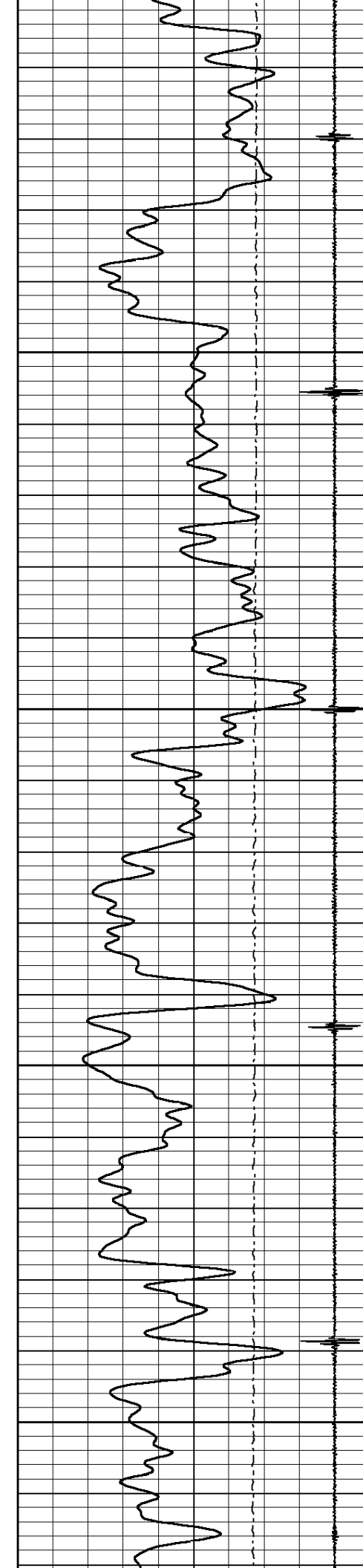
FREE PIPE SECTION

ZERO PRESSURE

Database File: 155946.db
 Dataset Pathname: eog/well/cbl1/pass8
 Presentation Format: cblcr_ws
 Dataset Creation: Thu Feb 12 13:29:50 2009 by Log Std Casedhole 07122
 Charted by: Depth in Feet scaled 1:240

-9	CCL	1	0	Amplitude x5 (mV)	20	200	Variable Density	1200
0	Gamma Ray (GAPI)	150	0	Amplitude (mV)	100			
2500	Line Tension (lb)	0	1	Bondix	0			
			700	TT (usec)	200			



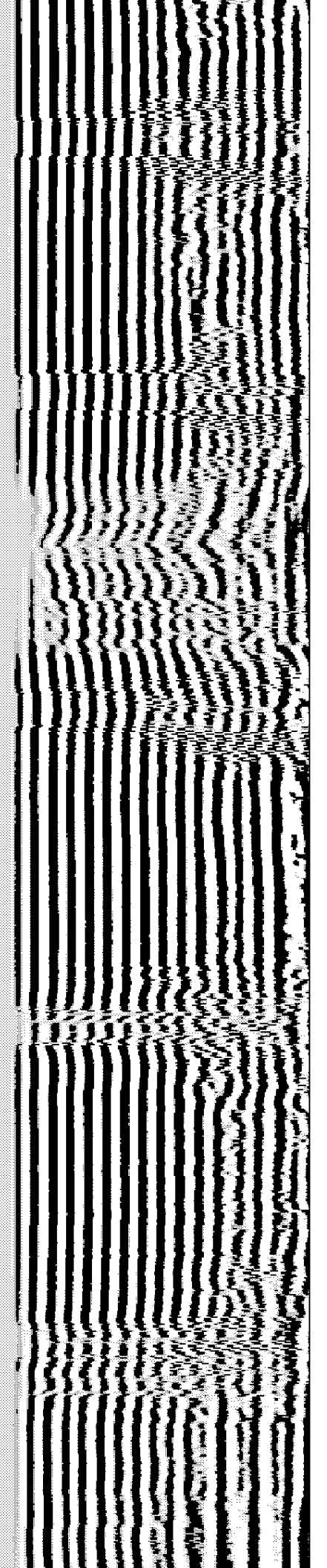
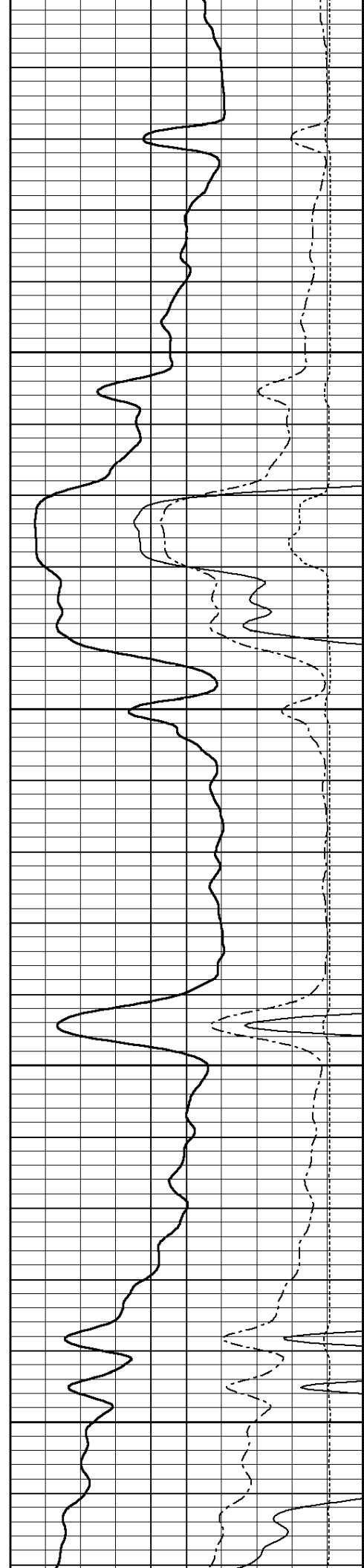


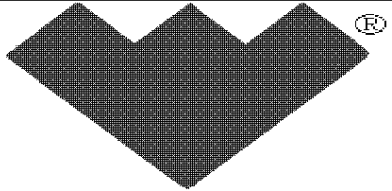
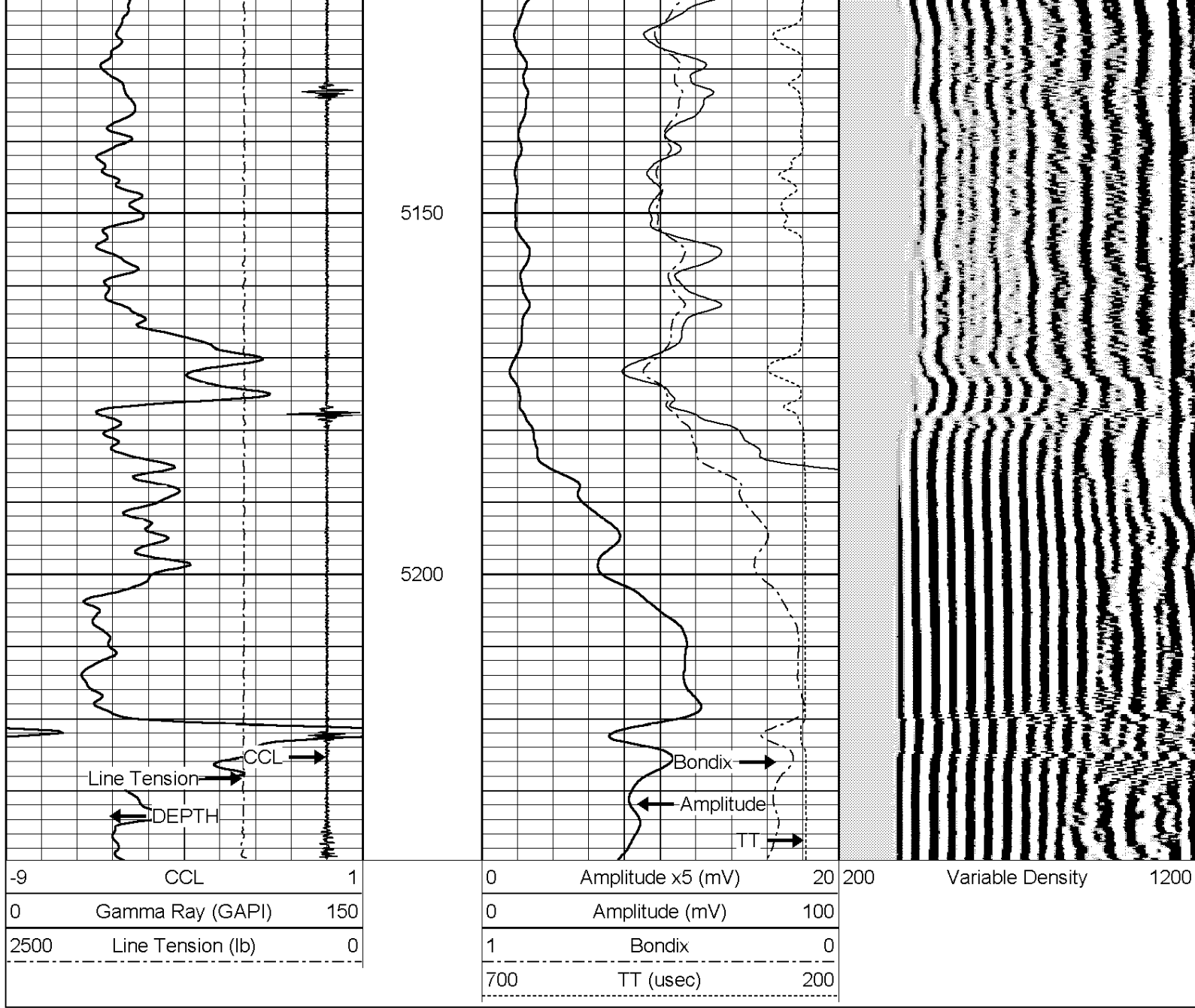
4950

5000

5050

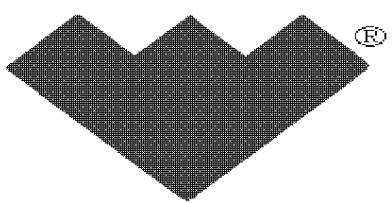
5100





FREE PIPE SECTION

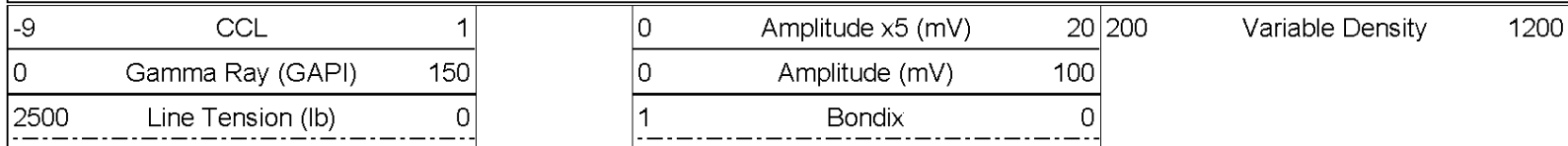
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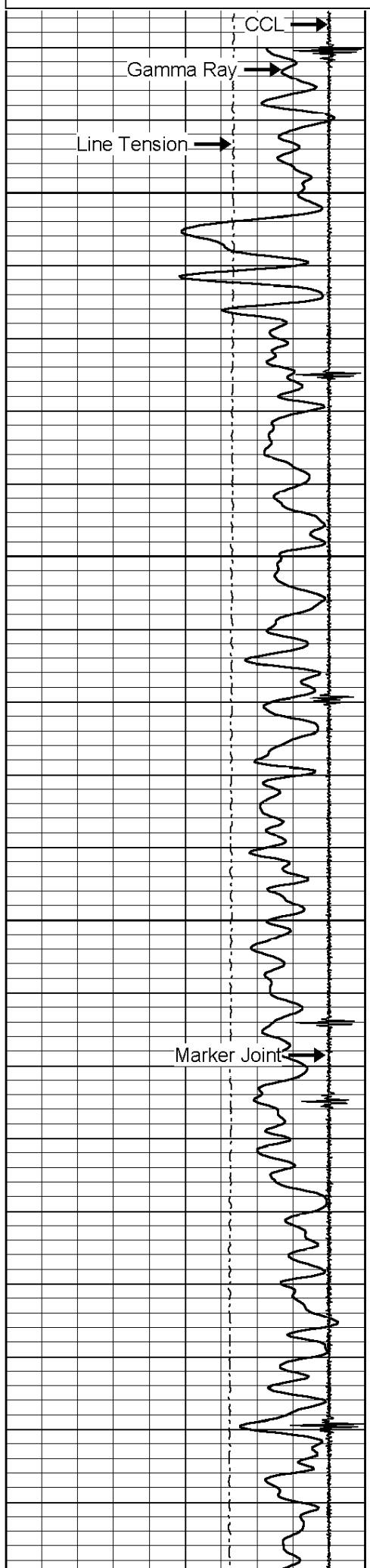


MAIN LOG

ZERO PRESSURE

Database File: 155946.db
 Dataset Pathname: eog/well/cbl1/pass6
 Presentation Format: cbl dr_ws
 Dataset Creation: Thu Feb 12 13:08:51 2009 by Log Std Casedhole 07122
 Charted by: Depth in Feet scaled 1:240





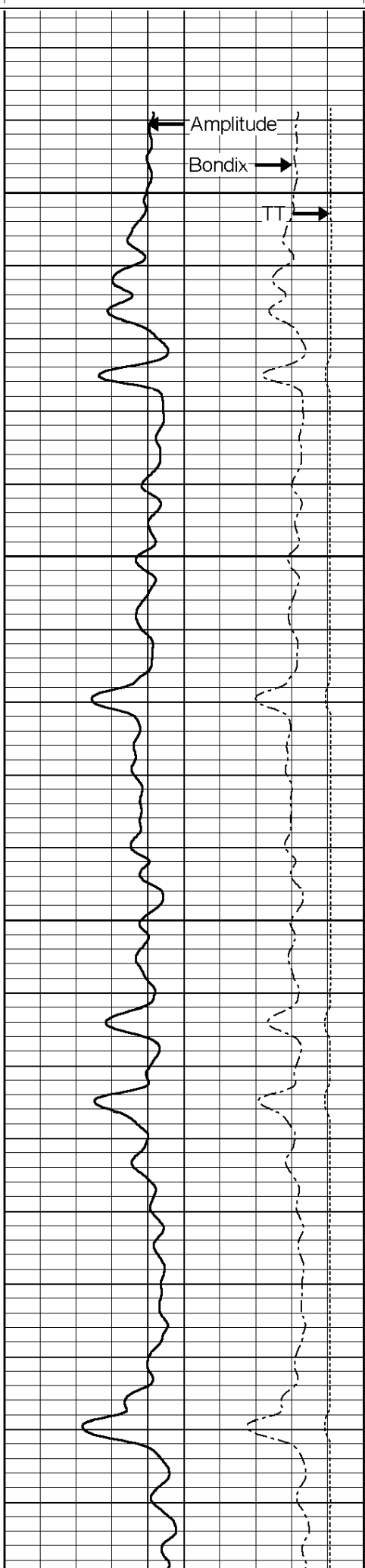
5800

5850

5900

5950

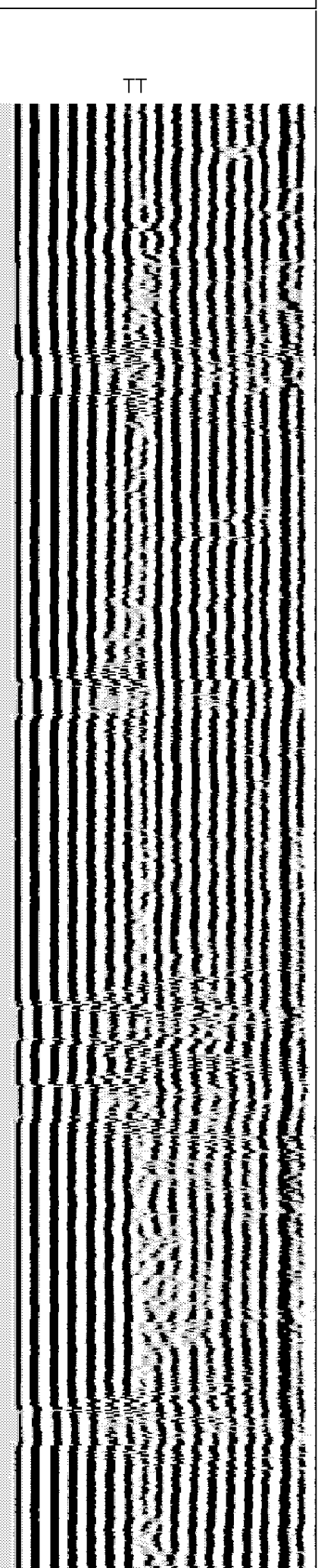
Marker Joint



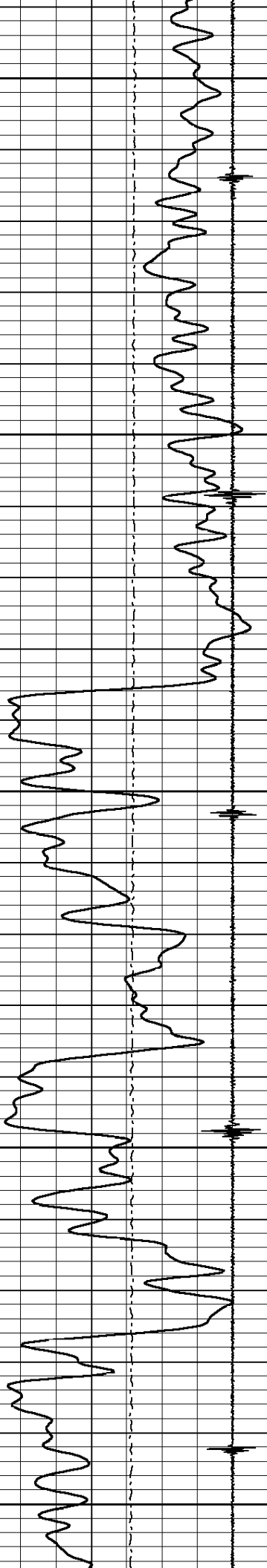
Amplitude

Bondix

TT



TT



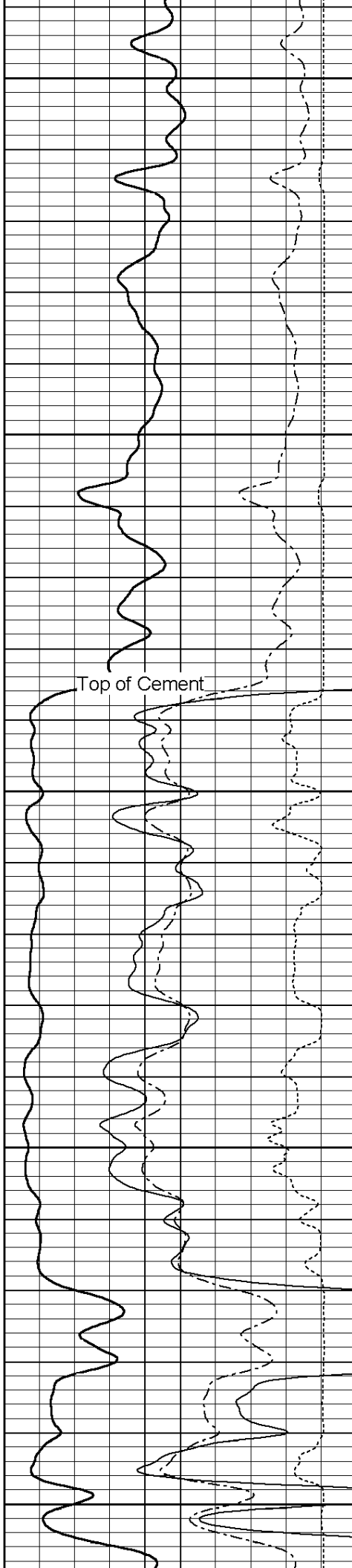
6000

6050

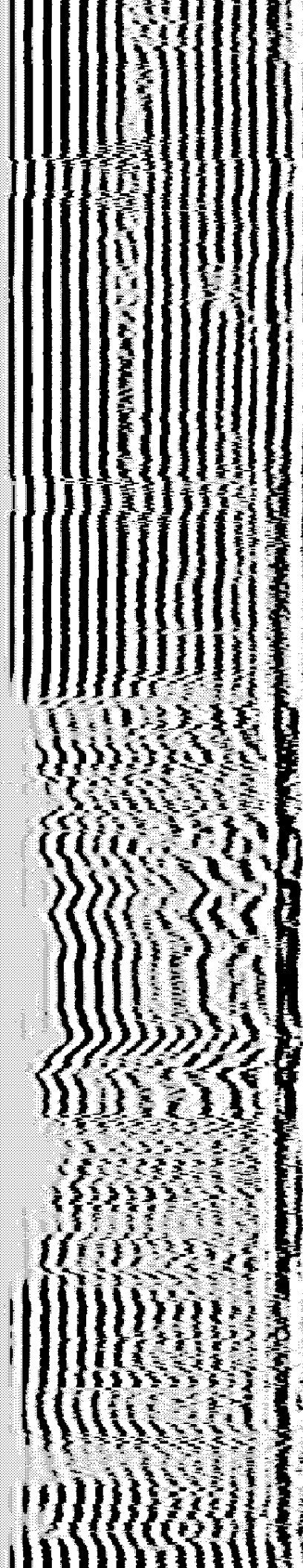
6100

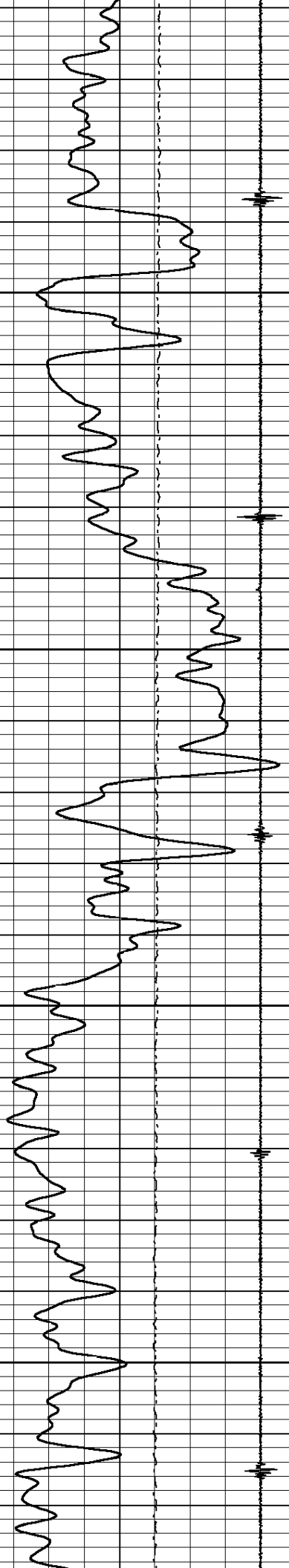
6150

6200



Top of Cement



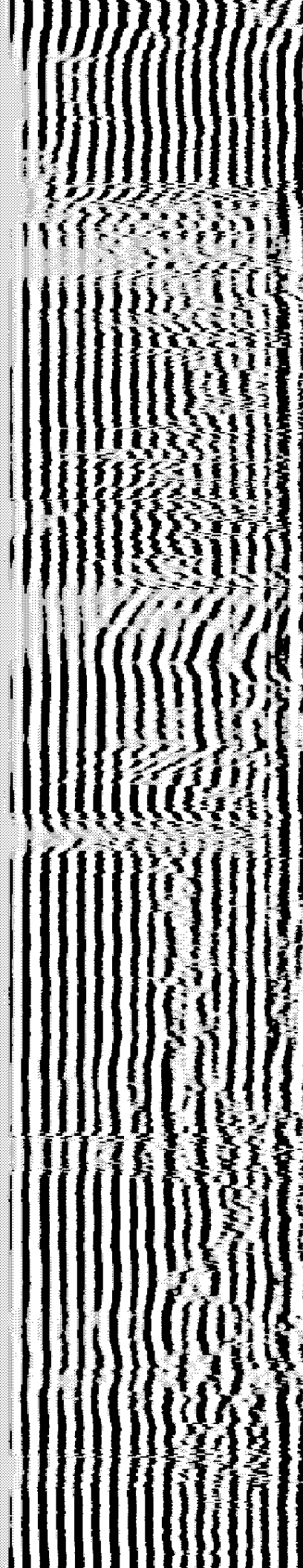
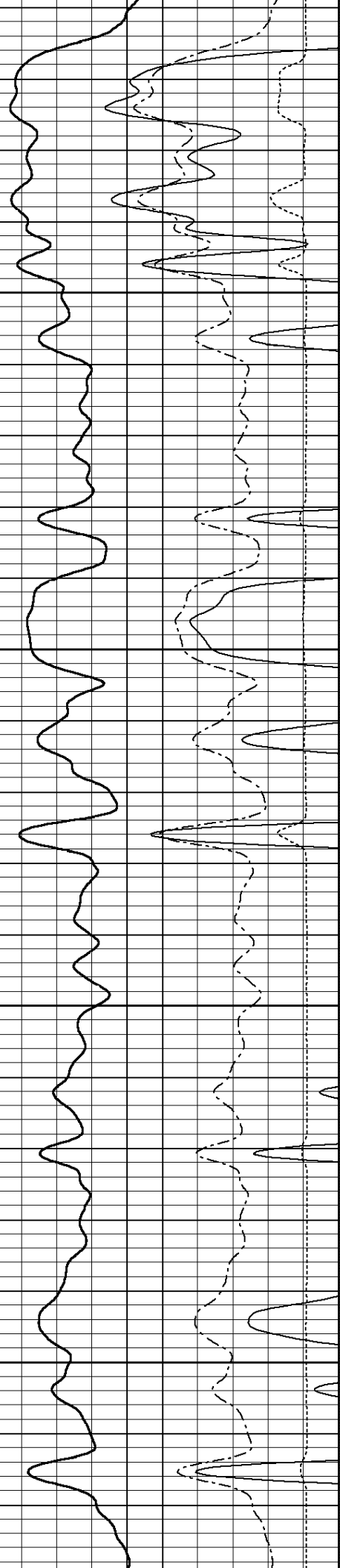


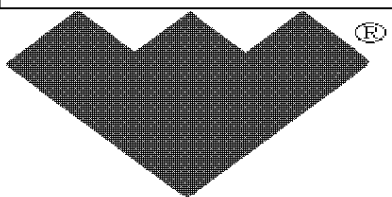
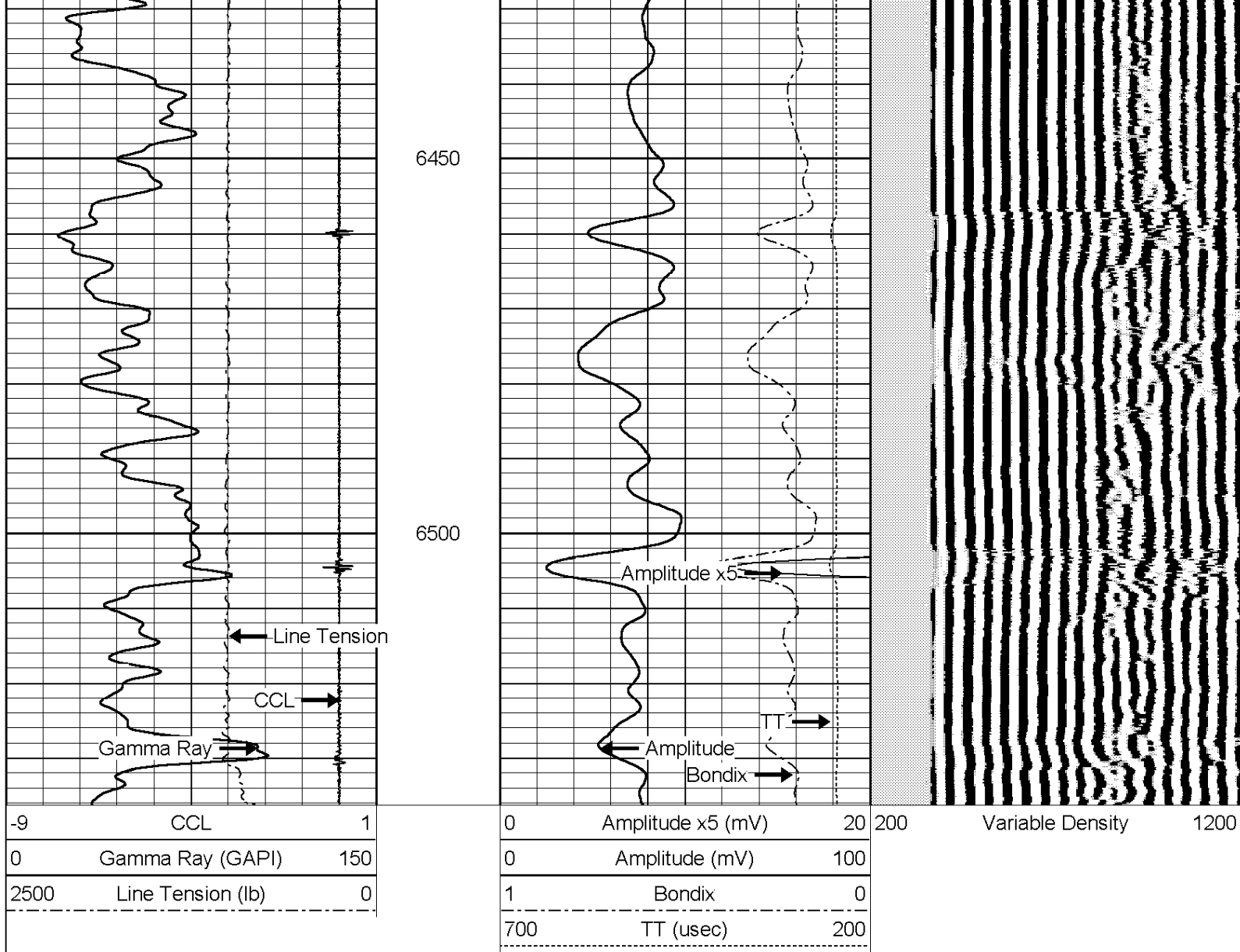
6250

6300

6350

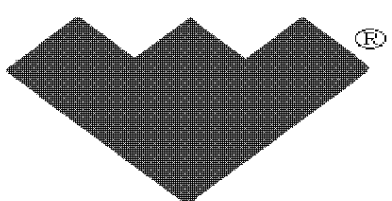
6400





MAIN LOG

ZERO PRESSURE

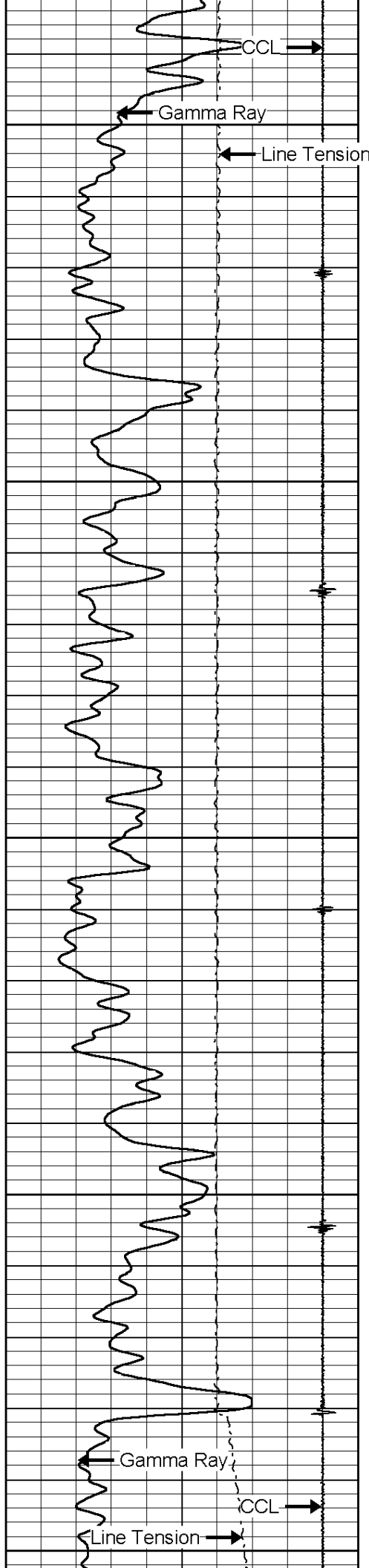


REPEAT SECTION

ZERO PRESSURE

Database File: 155946.db
 Dataset Pathname: eog/well/cbl1/pass5
 Presentation Format: cbl_dr_ws
 Dataset Creation: Thu Feb 12 12:57:44 2009 by Log Std Casedhole 07122
 Charted by: Depth in Feet scaled 1:240

-9	CCL	1	0	Amplitude x5 (mV)	20	200	Variable Density	1200
0	Gamma Ray (GAPI)	150	0	Amplitude (mV)	100			
2500	Line Tension (lb)	0	1	Bondix	0			
			700	TT (usec)	200			



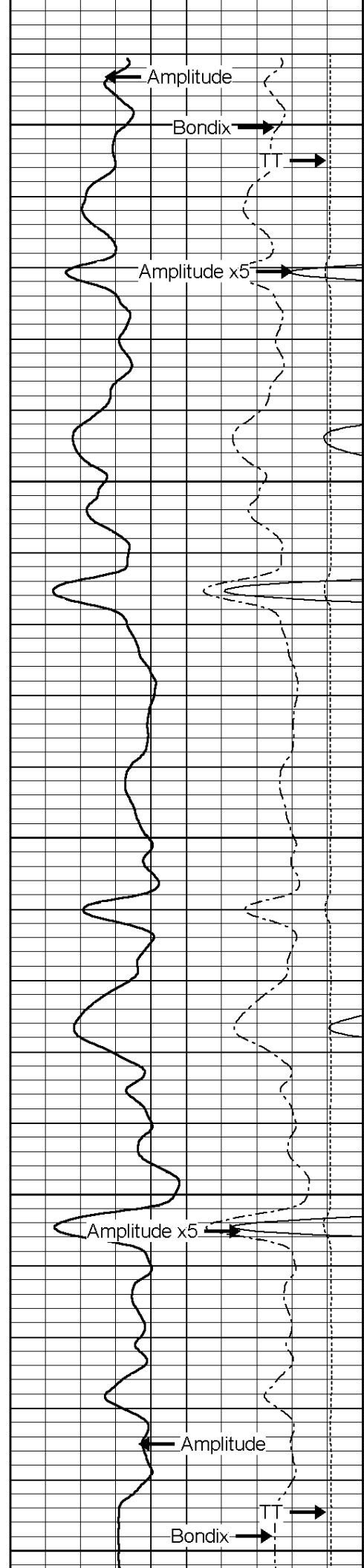
6350

6400

6450

6500

6550



Amplitude

Bondix

TT

Amplitude x5

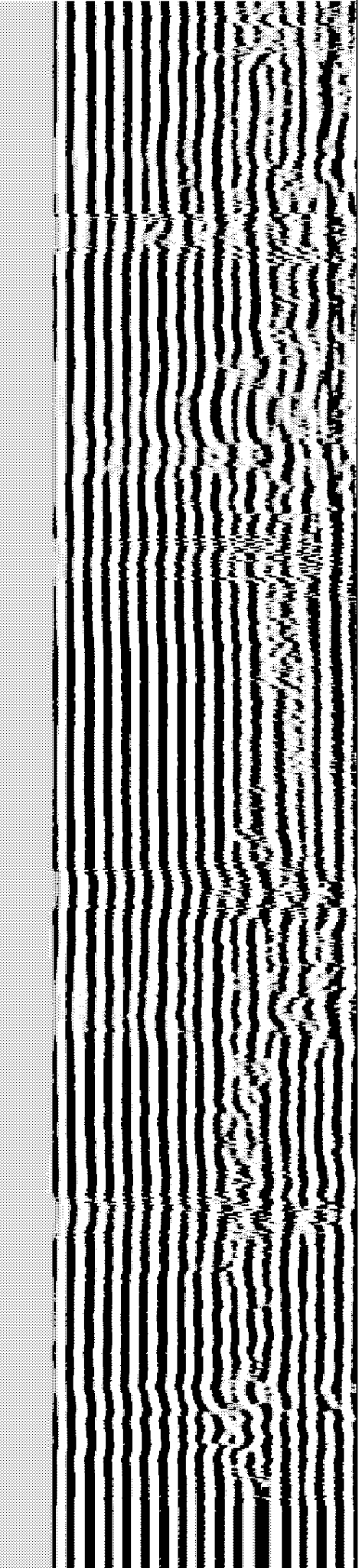
Amplitude x5

Amplitude

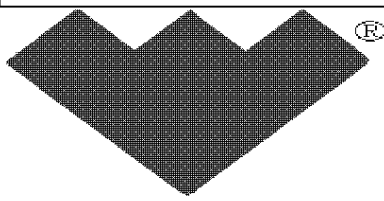
Bondix

TT

Variable Density



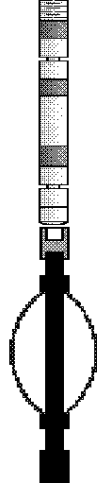
-9	CCL	1	0	Amplitude x5 (mV)	20	200	Variable Density	1200
0	Gamma Ray (GAPI)	150	0	Amplitude (mV)	100			
2500	Line Tension (lb)	0	1	Bondix	0			
			700	TT (usec)	200			



REPEAT SECTION

ZERO PRESSURE

Sensor	Offset (ft)	Schematic	Description	Len (ft)	OD (in)	Wt (lb)	
			Weatherford	1.03	1.44	1.00	
			1.6tekco cent 1 11/16" Tekco Bow Spring Centralizer	2.88	1.69	8.00	
CCL	0.00						
GR	-2.46			GR-GRSCCL1.6H (fortuna) 1 11/16" 400F/20K PSI probe SCIN GAMMA WITH CCL	10.23	1.69	26.50
WVF3FT	-11.25						
WVF5FT	-12.25		CBT-CBTP1.6M (fortuna) 1 11/16" 400F/20K PSI Probe 3'X5' Bond Tool	6.50	1.69	20.00	



1.6tekcocent
1 11/16" Tekco Bow Spring Centralizer

2.88

1.69

8.00

Dataset: 155946.db: eog/well/cbl1/pass8
 Total Length: 23.51 ft
 Total Weight: 63.50 lb
 O.D.: 1.69 in

Calibration Report

Database File: 155946.db
 Dataset Pathname: eog/well/cbl1/pass8
 Dataset Creation: Thu Feb 12 13:29:50 2009 by Log Std Casedhole 07122

CBL Calibration Report

Serial Number:	fortuna		
Tool Model:	CBTP1.6M		
Performed:	Thu Feb 12 12:49:22 2009		
Depth:	4621.410	ft	
Casing Diameter:	5.500	in	
	3' Spacing	5' Spacing	
Signal Zero:	1.000	1.000	mV
Calibrated Amplitude:	71.921	71.921	mV
Reading at Signal Zero:	0.004	0.005	V
Reading in Free Pipe:	0.606	0.730	V
Gain:	117.916	97.766	
Offset:	0.479	0.549	

Gamma Ray Calibration Report

Serial Number:	fortuna	
Tool Model:	GRSCCL1.6H	
Performed:	Fri Aug 01 09:47:43 2008	
Calibrator Value:	1.0	GAPI
Background Reading:	0.0	cps
Calibrator Reading:	1.0	cps
Sensitivity:	1.5000	GAPI/cps

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 15-189-22678-00-00
BANE 28 #1
SW/4 Sec.28-33S-37W
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