

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION 1115143

March 2010 This Form must be Typed Form must be Signed All blanks must be Filled

Form CP-1

		ICATION

Form KSONA-1, Certification of Compliance with the Kansas Surface Owner Notification Act,
MUST be submitted with this form.

OPERATOR: License #:		API No. 15 -		
Name:		If pre 1967, supply original comp	letion date:	
		Spot Description:		
Address 1:			/p S. R	East West
Address 2:		Feet from	North / Sou	th Line of Section
City: State:	_ Zip: +	- Feet from	East / We	st Line of Section
Contact Person:		Footages Calculated from Neare	st Outside Section Co	orner:
Phone: ( )		NE NW	SE SW	
		County:		
		Lease Name:	Well #:	
Check One: Oil Well Gas Well OG	D&A Cathoo		)thor:	
			Other:	
SWD Permit #:			Permit #:	
Conductor Casing Size:				
Surface Casing Size:				
Production Casing Size:	_ Set at:	Cemented with:		Sacks
List (ALL) Perforations and Bridge Plug Sets:				
Elevation: (G.L. /K.B.) T.D.:	PBTD: /		Stone Corral Formation)	
Condition of Well: Good Poor Junk in Hole		(Interval)		
Proposed Method of Plugging (attach a separate page if addit		(merval)		
Is Well Log attached to this application?	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 <u>et. seq</u> . and the Ru	les and Regulations of the State Cor	poration Commissio	n
Plugging of this Well will be done in accordance with K. Company Representative authorized to supervise plugging of		-		
	operations:			
Company Representative authorized to supervise plugging of	operations: City			
Company Representative authorized to supervise plugging of Address:	operations: City	: State:	Zip:	+
Company Representative authorized to supervise plugging a Address: Phone: ( )	operations: City	: State:	Zip:	+
Company Representative authorized to supervise plugging a Address: Phone: ( ) Plugging Contractor License #:	operations: City City Nar Add	: State: ne: ress 2:	Zip:	+
Company Representative authorized to supervise plugging a Address: Phone: ( ) Plugging Contractor License #: Address 1:	operations: City	: State: ne: ress 2:	Zip:	+
Company Representative authorized to supervise plugging a Address: Phone: ( ) Plugging Contractor License #: Address 1: City: Phone: ( )	operations: City City Nar Add	: State: ne: ress 2: State:	Zip:	+
Company Representative authorized to supervise plugging a Address: Phone: ( ) Plugging Contractor License #: Address 1: City:	operations: City City Nar Add	: State: ne: ress 2: State:	Zip:	+

Submitted Electronically

Mail to: KCC	<ul> <li>Conservation Divi</li> </ul>	sion, 130 S	. Market - Room	2078, Wichita,	Kansas	67202
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KANSAS CORPORATION COMMISSION	
OIL & GAS CONSERVATION DIVISION	

Form KSONA-1 July 2010 Form Must Be Typed Form must be Signed All blanks must be Filled

## 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 #	Well Location:		
Name:			
Address 1:	County:		
Address 2:	Lease Name: Well #:		
City: State: Zip:+	If filing a Form T-1 for multiple wells on a lease, enter the legal description of		
Contact Person:	the lease below:		
Phone: ( ) Fax: ( )			
Email Address:			
Surface Owner Information:			
Name:	When filing a Form T-1 involving multiple surface owners, attach an additional		
Address 1:	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		
Address 2:	county, and in the real estate property tax records of the county treasurer.		
City: State: Zip:+			

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.

## Submitted Electronically

I

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Form	CP1 - Well Plugging Application
Operator	Colt Energy Inc
Well Name	MacDougall 1
Doc ID	1115143

Perforations And Bridge Plug Sets

Perforation Top	Perforation Base	Formation	Bridge Plug Depth
0	0	WEISER	0

## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

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Select the corresponding form being filed: C-1 (Intent) CB-1 (Cathodic Protection Borehole Intent) T-1 (Transfer) CP-1 (Plugging Application)

OPERATOR:       License #       5150         Name:       COLT ENERGY, INC         Address 1:       P O BOX 388, 1112 RHODE ISLAND RD         Address 2:	Well Location: <u>SE_NW_NW_SE_Sec.31_Twp. 17_S. R. 21</u> East West County: <u>FRANKLIN</u> Lease Name: <u>MACDOUGALL</u> Well #: <u>1</u> If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:
Surface Owner Information:         Name:       PAUL MACDOUGALL         Address 1:       514 SAN LORENZO CT         Address 2:	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.

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- 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.

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I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date: Sign	nature of Operator or Agent:	Titl	e:
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Select the corresponding form being filed: C-1 (Intent) CB-1 (Cathodic Protection Borehole Intent) T-1 (Transfer) CP-1 (Plugging Application)

OPERATOR:       License #       5150         Name:       COLT ENERGY, INC         Address 1:       P O BOX 388, 1112 RHODE ISLAND RD         Address 2:       City:         City:       IOLA         State:       KS         Zip:       66749 + 0338         Contact Person:       SHIRLEY STOTLER         Phone:       (620 ) 365-3111         Fax:       (620 ) 365-3170         Email Address:       coltenergy@aceks.com	Well Location: <u>SE_NW_NW_SE_Sec.31_Twp. 17_S. R. 21</u> East West County: <u>FRANKLIN</u> Lease Name: <u>MACDOUGALL</u> Well #: <u>1</u> If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:
Surface Owner Information:           Name:         DIANA SHORT           Address 1:         16300 HIGHT AVE           Address 2:	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.

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I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date:	Signature of Operator or Agent:	Title:
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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

February 12, 2013

SHIRLEY STOTLER Colt Energy Inc PO BOX 388 IOLA, KS 66749-0388

Re: Plugging Application API 15-059-24781-00-00 MacDougall 1 SE/4 Sec.31-17S-21E Franklin County, Kansas

Dear SHIRLEY STOTLER:

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 August 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 3

(620) 432-2300