

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1149113 This Form

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

Form CP-1

WELL PLUGGING APPLICATION	WELL	PLU	GGING	APPL	ICATION.
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OPERATOR:       List ALL Performance #:       API No. 15	Form KSONA-1, Cert		nce with the Kansas ubmitted with this fo		lotificatio	on Act,		
States 1:   Address 2:   City:   State:   Contact Pencor:   Phone:   Phone:   Contact Pencor:   State:   Conductor Casing State:   State:   Conductor Casing State:   Conductor Casing State:   Conductor Casing State:   State:   Conductor Casing	OPERATOR: License #:		API	No. 15				
Addess 1	Name:		If pre	e 1967, supply origin	al comple	tion date:		
Address 2:	Address 1:	Spot	Spot Description:					
Chy:	Address 2:			Sec.	Twp	S.  R	East	West
Contact Person:				Fe	et from	North /	South Line of	Section
Phone: ( )				Fe	et from	East /	West Line of	Section
County:			Foot	ages Calculated from	n Nearest	Outside Sectio	n Corner:	
Lease Name:       Well #:         Check One:       Oil Well       Gas Well       OG       D&A       Cathodic       Water Supply Well       Other:         SWD Permit #:       ENHR Permit #:       Gas Storage Permit #:       Gas Storage Permit #:       Sola         Conductor Casing Size:       Set at       Comented with:       Solas         Sufface Casing Size:       Set at       Cemented with:       Solas         Production Casing Size:       Set at       Cemented with:       Solas         List ALLY Perforations and Bridge Plug Sets:       Set at:       Cemented with:       Solas         Elevation:       (@L/	Phone: ( )			NE	NW	SE		
Check One:  Check								
SWD       Permit #:			Leas	se Name:		Well #	:	
Conductor Casing Size:       Set at       Cemented with:       Sacks         Surface Casing Size:       Set at       Cemented with:       Sacks         Production Casing Size:       Set at:       Cemented with:       Sacks         Production Casing Size:       Set at:       Cemented with:       Sacks         List (ALL) Perforations and Bridge Plug Sets:       Set at:       Cemented with:       Sacks         Elevation:       (@ALL/   K.B.J T.D.:       PBTD:       Anhydrite Depth:       (Store Coral Formatori)         Condition of Well:       Good       Poor       Junk in Hole       Cassing Leak at:       (mexal)         Proposed Method of Plugging (attach a separate page if additional space is needed):       (mexal)       (Store Coral Formatori)         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 gt, sgg, and the Rules and Regulations of the State Corporation Commission       Company Representative authorized to supervise plugging operations:       Address:       Zip:       +	Check One: Oil Well Gas Well	OG D&A	Cathodic V	Water Supply Well	Oth	ner:		
Surface Casing Size: Set at: Cemented with: Sacks   Production Casing Size: Set at: Cemented with: Sacks   List ( <i>ALL</i> ) Perforations and Bridge Plug Sets: Set at: Cemented with: Sacks   Elevation: (] G.L./ [_K.B.] T.D.: PBTD: Anhydrite Depth: (Store Correl Formator)   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 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 is seq, and the Rules and Regulations of the State Corporation Commission   Company Representative authorized to supervise plugging operations: Address : Zip: +   Phone:	SWD Permit #:	ENHR Per	rmit #:	Gas	Storage I	Permit #:		_
Production Casing Size:	Conductor Casing Size:	Set at:		Cemented with:				_ Sacks
List ( <i>ALL</i> ) Perforations and Bridge Plug Sets:  Elevation:	Surface Casing Size:	Set at:		Cemented with:				_ Sacks
Elevation:       ( □ GL / □ KB) T.D:       PBTD:       Anhydrite Depth:       (stone Correl 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):       (interval)       (interval)         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:	Production Casing Size:	Set at:		Cemented with:				Sacks
Elevation:       ( □ GL / □ KB) T.D:       PBTD:       Anhydrite Depth:       (stone Correl 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):       (interval)       (interval)         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:	List (ALL) Perforations and Bridge Plug Sets:							
Company Representative authorized to supervise plugging operations:	Proposed Method of Plugging (attach a separate page if a Is Well Log attached to this application?	additional space is needed	(Interval) d):		(Sto	one Corral Formatio	nn)	
Phone: ( )	Company Representative authorized to supervise pluggi	ing operations:						
Plugging Contractor License #:								
Address 1:								
City:								
Phone: ( ) Proposed Date of Plugging (if known):								
Proposed Date of Plugging (if known):				30		_ <u> </u>	T	

Submitted Electronically

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 672	Mail to:	KCC -	Conservation	Division,	130 S.	Market	- Room	2078.	Wichita,	Kansas	6720
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## KANSAS CORPORATION COMMISSION **OIL & GAS CONSERVATION DIVISION**

1149113

# **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:+	5 I S I			
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 county, and in the real estate property tax records of the county treasurer.			
Address 2:				
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

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July 2010

Form Must Be Typed Form must be Signed

All blanks must be Filled

### KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

CERTIFICATION OF COMPLIANCE WITH THE KANSAS SURFACE OWNER NOTIFICATION ACT

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

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:+			

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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:
24(0)		

Conservation Division Finney State Office Building 130 S. Market, Rm. 2078 Wichita, KS 67202-3802 Kansas Corporation Commission

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

June 24, 2013

LARRY GRAHAM PostRock Midcontinent Production LLC Oklahoma Tower 210 Park Ave, Ste 2750 OKLAHOMA CITY, OK 73102

Re: Plugging Application API 15-099-23530-00-00 KEITH TRUSTS 1-24 SE/4 Sec.24-32S-19E Labette County, Kansas

Dear LARRY GRAHAM:

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 21, 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