

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1156578

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

Form CP-1

WELL	PLUG	GING	APPLI	CATION
	<i></i>			a i a

Address 1: Spot Description:	Form KSONA-1, Cert	tification of Compliance MUST be subr	nitted with this form.	ace Owner Notificat	ion Act,	
Statics 1:	OPERATOR: License #:		API No. 15			
Address 1Address 1Address 1	Name:	If pre 1967	_ If pre 1967, supply original completion date:			
Address 2:	Address 1:		Spot Desci	ription:		
City:	Address 2:			Sec Tw	rp S. R	East West
Contact Person:	City: State:		Feet from	North / S	South Line of Section	
Phone: ()				Feet from	East / V	Vest Line of Section
Check One: Oil Well Gas Well OG D&A Cathodic Water Supply Well Other:			Ŭ Ŭ			Corner:
Lease Name: Well #: Check One: OI Well Gas Well OG D&A Cathodic Water Supply Well Other: SWD Permit #: ENHR Permit #: Sack Conductor Casing Size: Set at: Cemented with: Sack Production Casing Size: Set at: Cemented with: Sack Production Casing Size: Set at: Cemented with: Sack List (ALL) Perforations and Bridge Plug Sets:	Phone: ()					
Check One: Oil Well Gas Storage Permit #: Gas Storage Pe			,			
□ SWD Permit #:			Lease Nan	ne:	Vveil #:	
SWD Permit #: ENHR Permit #: Gas Storage Permit #: Sack Surface Casing Size: Set at: Cemented with: Sack Production Casing Size: Set at: Cemented with: Sack List (ALL) Perforations and Bridge Plug Sets: Elevation: (GL/K_BTD.; PBTD: Anhtydrite Depth: (store Corral Formation) Condition of Welt: Good Poor Junk in Hole Casing Leak at:(uterwal) 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 It 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: City: State: Zip: + Phone: () Name: Address 2: State: Zip: +	Check One: Oil Well Gas Well	OG D&A	Cathodic Water S	Supply Well	other:	
Conductor Casing Size: Set at: Cemented with: Sack Surface Casing Size: Set at: Cemented with: Sack Production Casing Size: Set at: Cemented with: Sack List (ALL) Perforations and Bridge Plug Sets: Set at: Cemented with: Sack Elevation: (SWD Permit #:		 t #:			
Surface Casing Size:						
Production Casing Size:	.					
List (<i>ALL</i>) Perforations and Bridge Plug Sets: Elevation:(GL/KB)_T.D:PBTD:Anhydrite Depth:(Stone Corral Formation) Condition of Well:GoodPoorJunk in HoleCasing Leak at:(Interval) Proposed Method of Plugging (attach a separate page if additional space is needed): Is Well Log attached to this application?YesNoIs ACO-1 filed?YesNo 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:						
Elevation: (GL./ [KB] T.D.; PBTD:			0			
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: Phone: () Plugging Contractor License #: Address 1: City: State: Zip: + Phone: () Phone: ()				(5	Stone Corral Formation,)
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: Phone: () Plugging Contractor License #: Address 1: City: State: Zip: + Phone: () Phone: ()	Is Well Log attached to this application?	No Is ACO-1 filed?	Yes No			
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:						
Company Representative authorized to supervise plugging operations:						
Address:	Plugging of this Well will be done in accordance with	h K.S.A. 55-101 <u>et. seq</u> . ar	nd the Rules and Regulat	ions of the State Cor	poration Commiss	sion
Phone: ()	Company Representative authorized to supervise plugg	ing operations:				
Plugging Contractor License #: Name: Address 1: Address 2: City:	Address:		City:	State:	Zip:	
Address 1: Address 2: City:	Phone: ()					
City: State: Phone: ()	Plugging Contractor License #:		Name:			
Phone: ()	Address 1:		Address 2:			
	City:			State:	Zip:	+
Proposed Date of Plugging (if known):	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

Mail to: KCC	 Conservation Division, 	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

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Form	CP1 - Well Plugging Application
Operator	PostRock Midcontinent Production LLC
Well Name	O SHOUSE 1
Doc ID	1156578

Perforations And Bridge Plug Sets

Perforation Top	Perforation Base	Formation	Bridge Plug Depth
1560	1570	MISSISSIPPI	

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

August 28, 2013

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

Re: Plugging Application API 15-049-20562-00-00 O SHOUSE 1 SW/4 Sec.13-30S-12E Elk 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 February 24, 2014. 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