



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.

Submitted Electronically

Form	CP1 - Well Plugging Application
Operator	Vess Oil Corporation
Well Name	MAUCH 1-16
Doc ID	1170393

Perforations And Bridge Plug Sets

Perforation Top	Perforation Base	Formation	Bridge Plug Depth
4390	4396	Cherokee	

GEARHART

DUAL LATEROLOG

API # 15-135-22878	FILING NO. _____ COMPANY <u>SOUTHERN STATES OIL COMPANY</u> WELL <u>MAUCH NO. 1-16</u> FIELD <u>EAST PAWNEE VALLEY</u> COUNTY <u>NESS</u> STATE <u>KANSAS</u> LOCATION: _____ SEC <u>16</u> TWP <u>20S</u> RGE <u>23W</u> Other Services _____ <u>CDL/CNS/GR/CAI</u> <u>MOP</u>			
Permanent Datum <u>GL</u> Elev. <u>2272</u> Log Measured from <u>KB</u> <u>6</u> Ft. Above Perm. Datum Drilling Measured from <u>KB</u>		Elev.: K.B. <u>2278</u> D.F. <u>2276</u> G.L. <u>2272</u>		
Date	<u>7-30-85</u>			
Run No.	<u>One</u>			
Depth-Driller	<u>4450</u>			
Depth-Logger	<u>4454</u>			
Bottom Logged Interval	<u>4440</u>			
Top Logged Interval	<u>597</u>			
Casing-Driller	<u>8 5/8 @ 608</u>	@	@	
Casing-Logger	<u>-</u>			
Bit Size	<u>7 7/8</u>			
Type Fluid in Hole	<u>Chem Gel</u>			
Density	<u>9.6</u> <u>46</u>			
Viscosity	<u>6.5</u> <u>6</u> cc			
Fluid Loss	cc cc cc			
Source of Sample	<u>Flowline</u>			
Rm @ Meas. Temp.	<u>.26 @ 71 °F</u>	@ °F	@ °F	
Rmf @ Meas. Temp.	<u>.20 @ 70 °F</u>	@ °F	@ °F	
Rmc @ Meas. Temp.	<u>.34 @ 70 °F</u>	@ °F	@ °F	
Source of Rmf	<u>M</u>			
Rmc	<u>C</u>			
Rm @ BHT	<u>.16 @ 120 °F</u>	@ °F	@ °F	
End Circulation	<u>0420</u> Hours			
Time to Open Bottom	<u>0804</u> Hours			

Sample No.	Type Log	Scale Up Hole			Scale Down Hole					
		Depth	DUAL LATEROLOG		GAMMA RAY		OTHER			
			Tool No.	Tool Type	Tool Position	S. O.		Tool No.	Tool Type	
1			15042	DLT-BA	Cent.	BOW Spring	33061	UGR-DG	18026	MSEBA

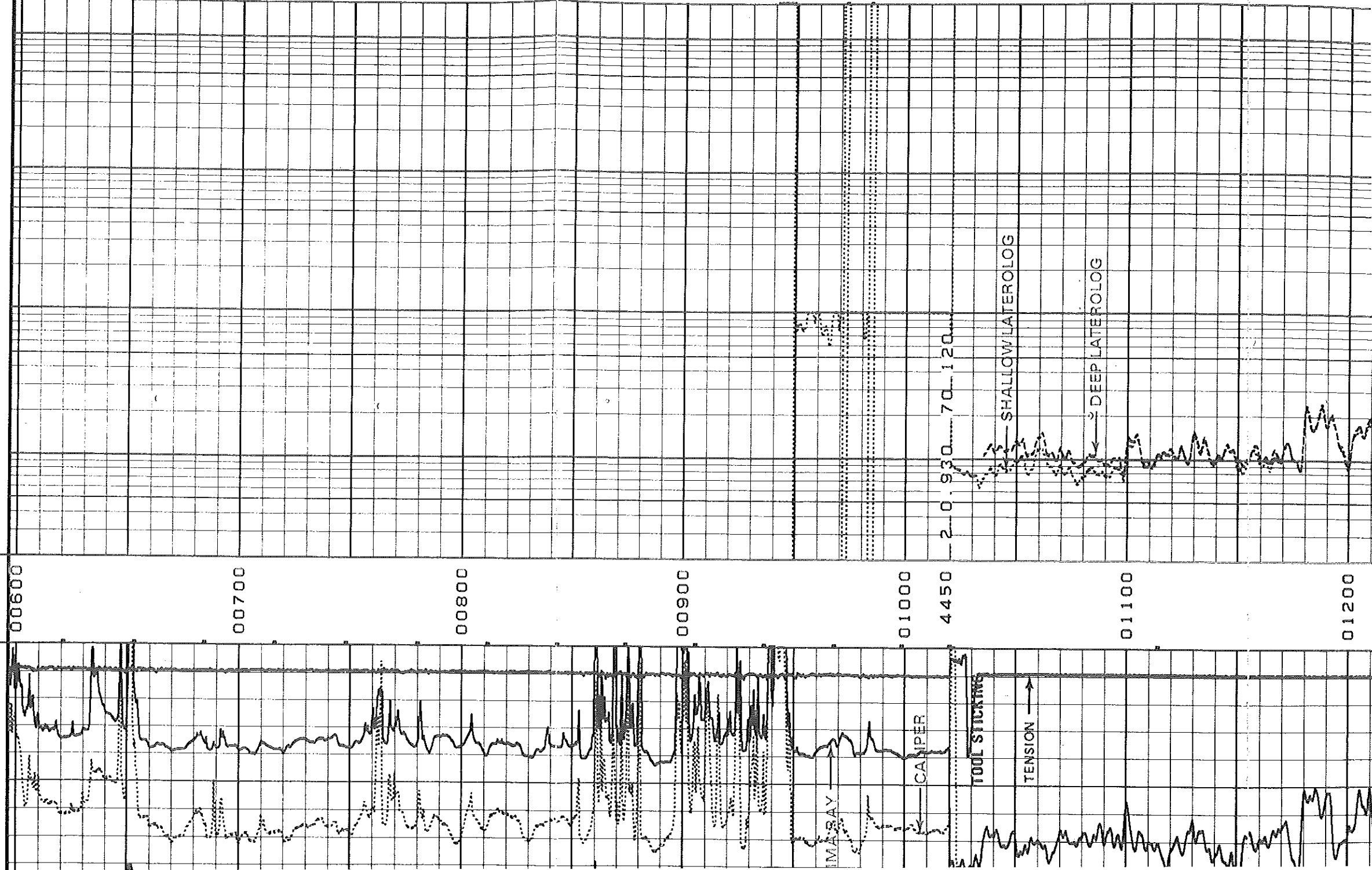
CALIBRATION DATA			
LLD High	LLD Low	LLS High	LLS Low
81540	1530	84512	1930
GAMMA RAY		MSFL	MSFL
API Scale	BKG.	STD.	STD.
15	152.2	610.6	

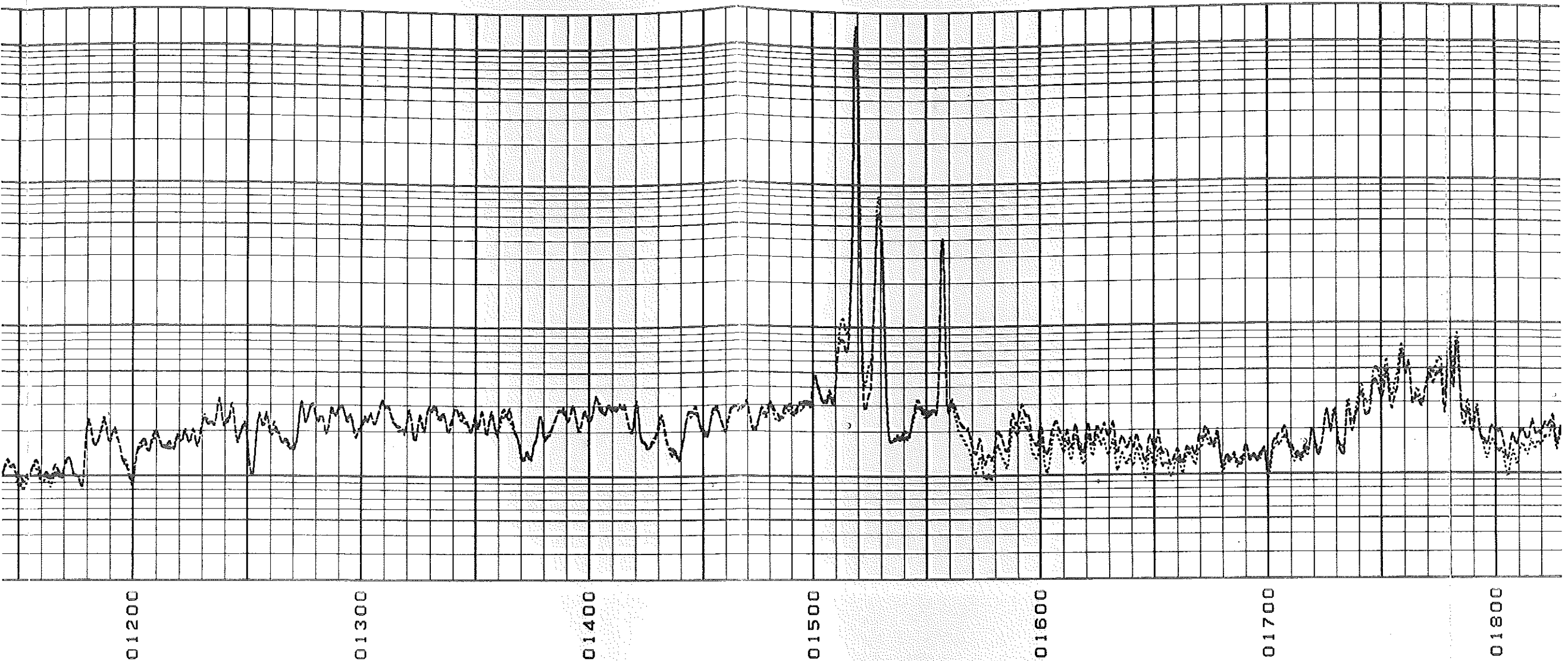
S: PULLED TIGHT AT 1032 LOST TOOL IN HOLE
 CDL/CNS LOGGED TO SURFACE CASING. CLOSED CALIPERS TO ENTER CASING.
 TENSION SCALE: 10,000-0#.

NOTICE: Gearhart Industries, Inc. cannot and does not guarantee the accuracy or correctness of any log data or of any interpretation thereof and shall not be liable or responsible for any loss, cost, damage or expense incurred or sustained by Customer resulting from any log data or interpretation made by Gearhart Industries, Inc. or any of its agents, servants or employees. Neither log data nor interpretation thereof should be relied upon as the sole basis for any drilling, completion, well treatment or production decision or any other procedure. Unless there is presently in effect a master or other specific or general contract intended to extend and apply hereto, this Log is provided in accordance with Gearhart Industries, Inc.'s General Terms and Conditions as set out in its current price schedule. GEARHART INDUSTRIES, INC.

CALIPER 16

GR API 150





01200

01300

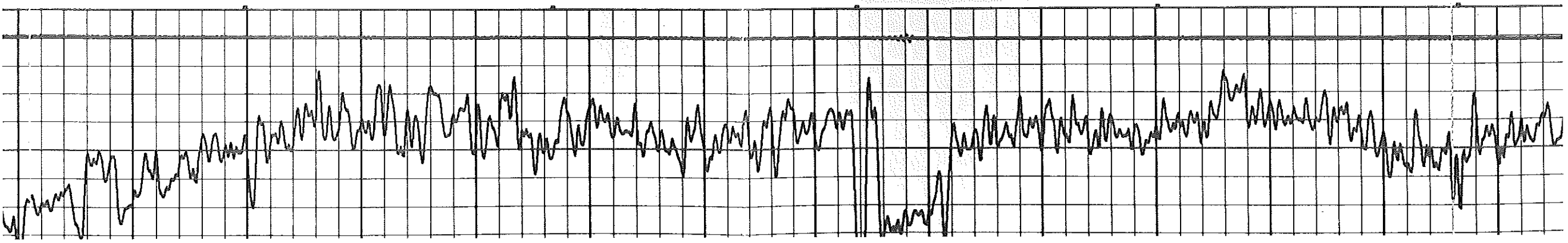
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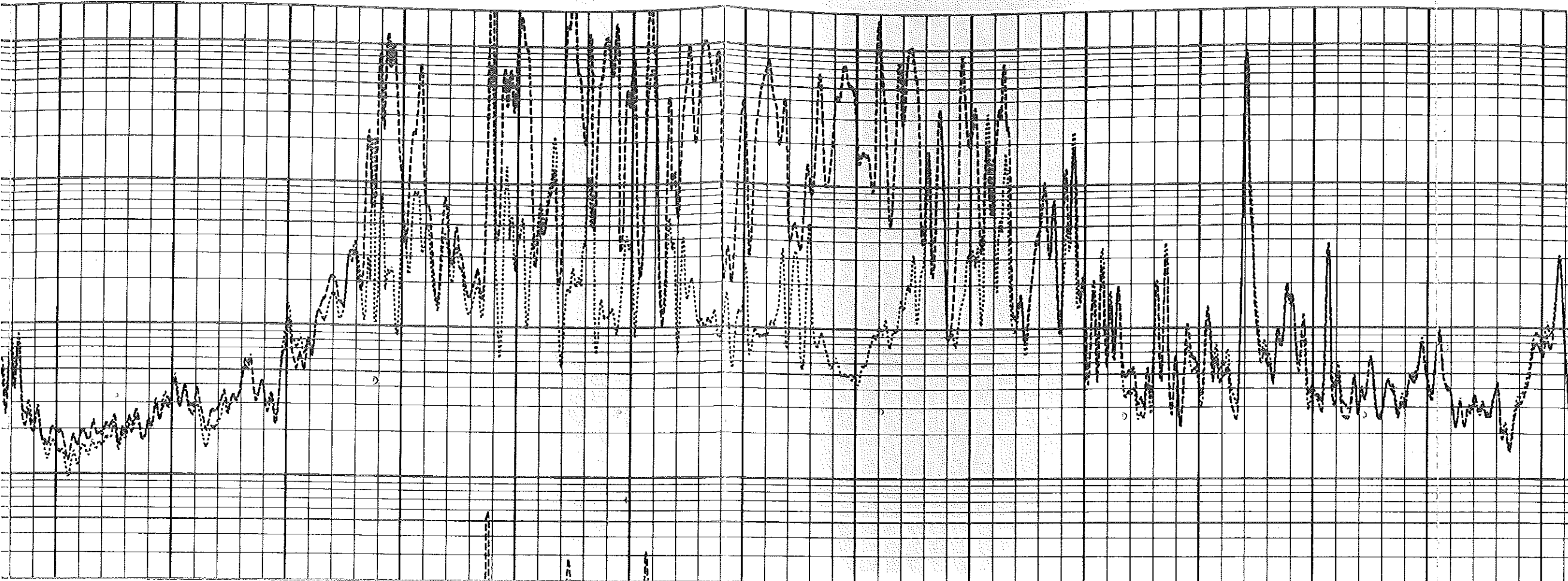
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01600

01700

01800





01800

01900

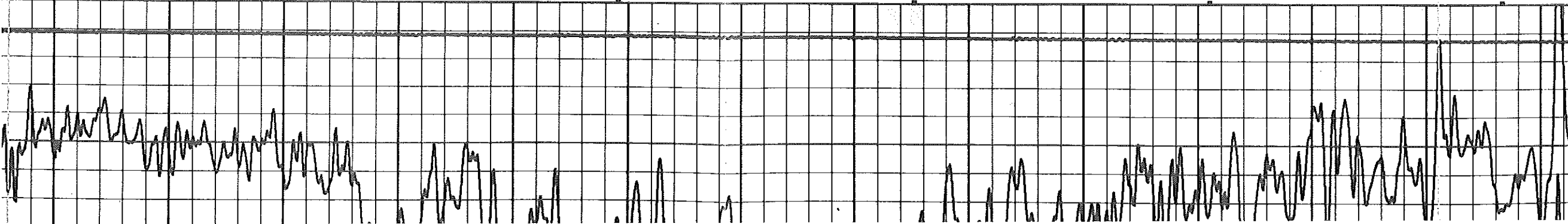
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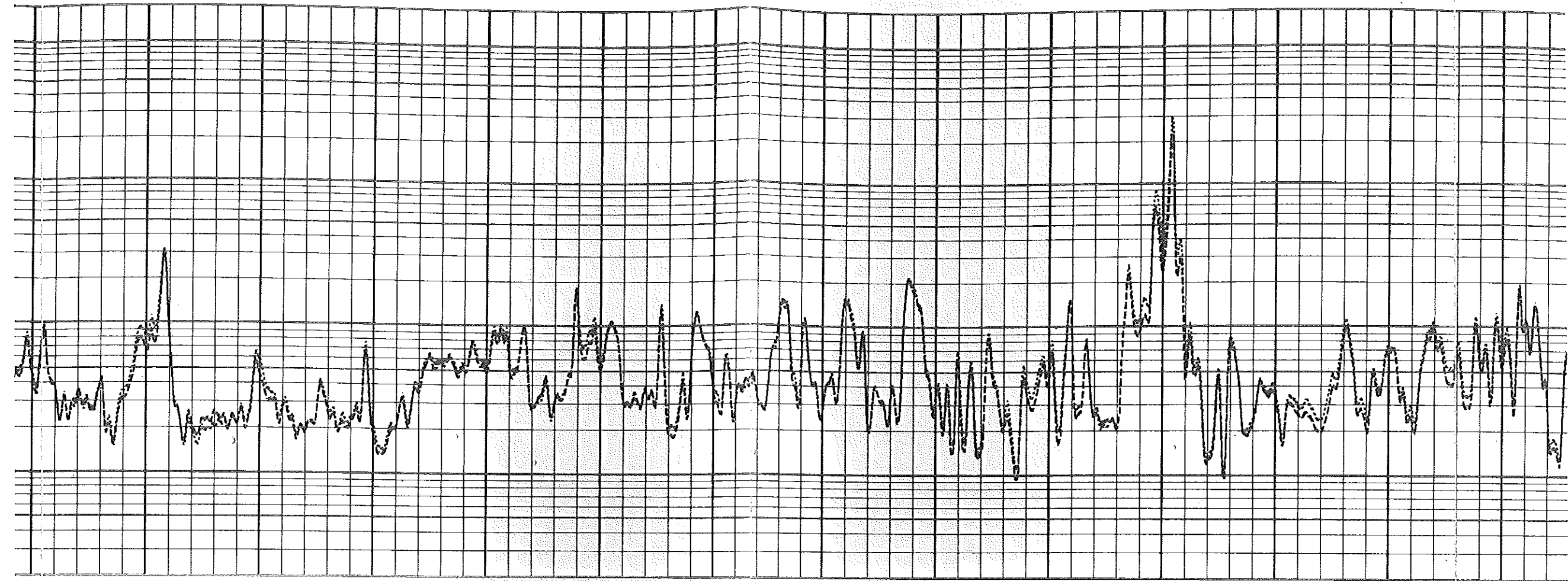
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02200

02300

02400





02400

02500

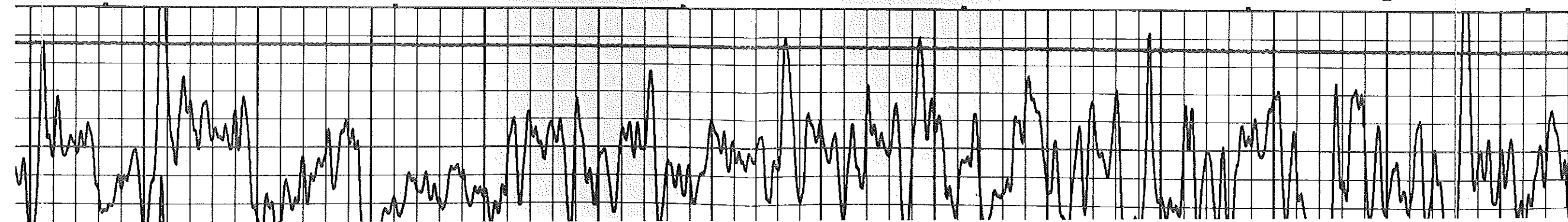
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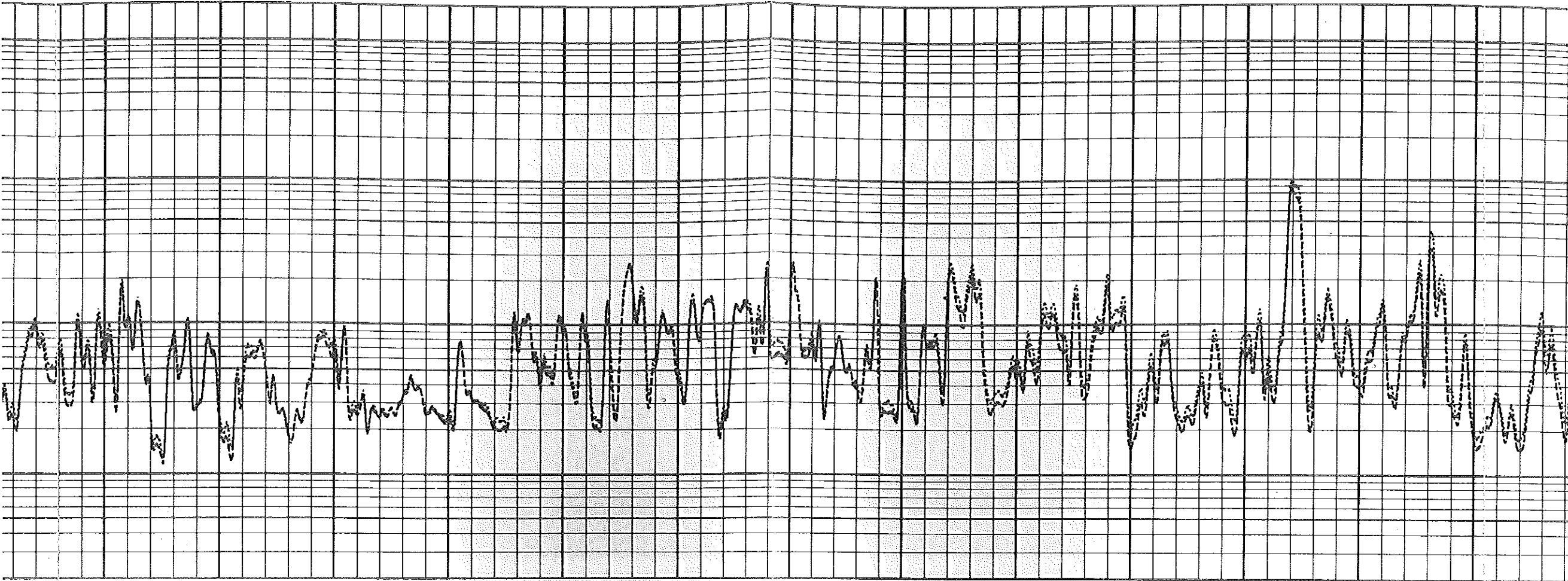
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02800

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03000





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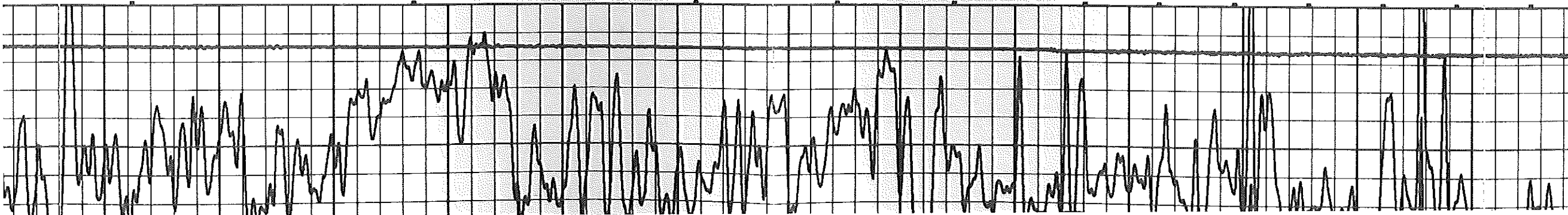
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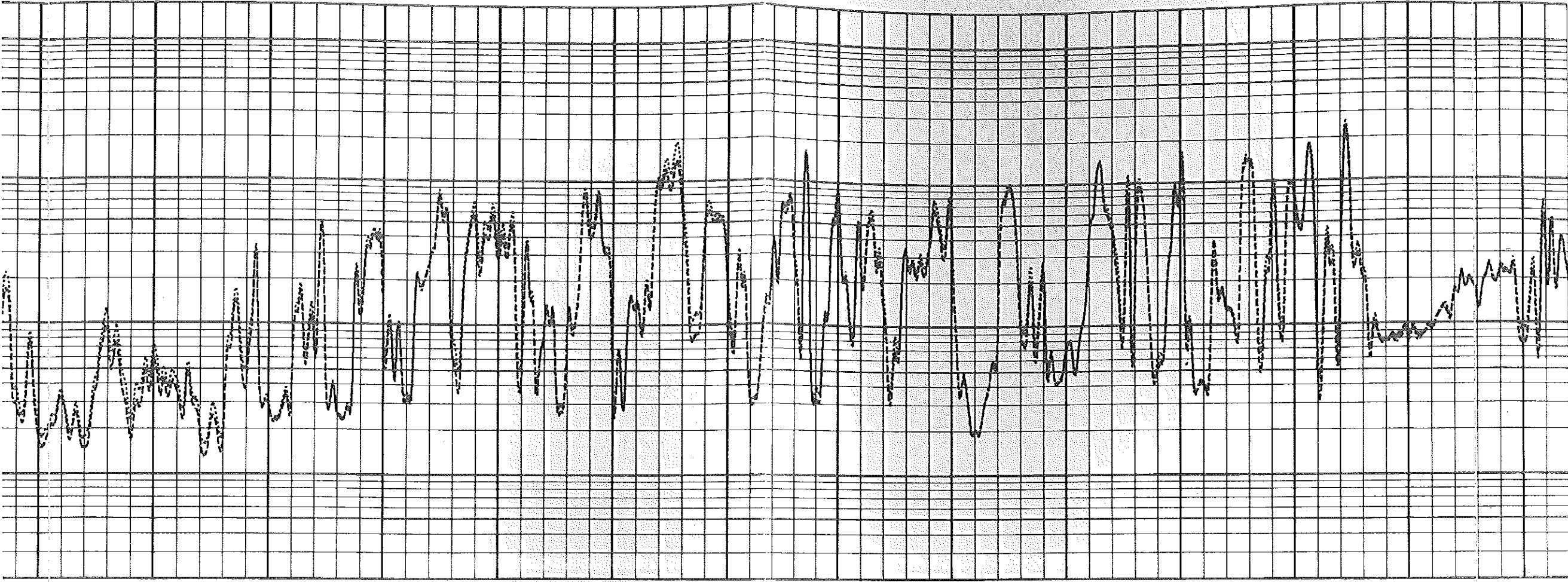
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03400

03500

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03700

03800

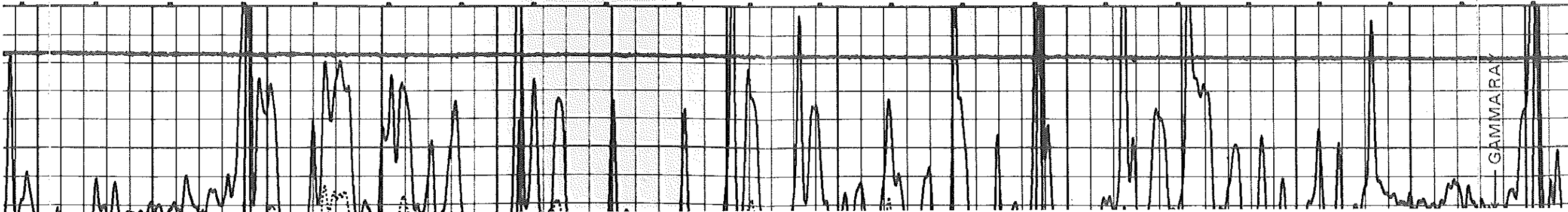
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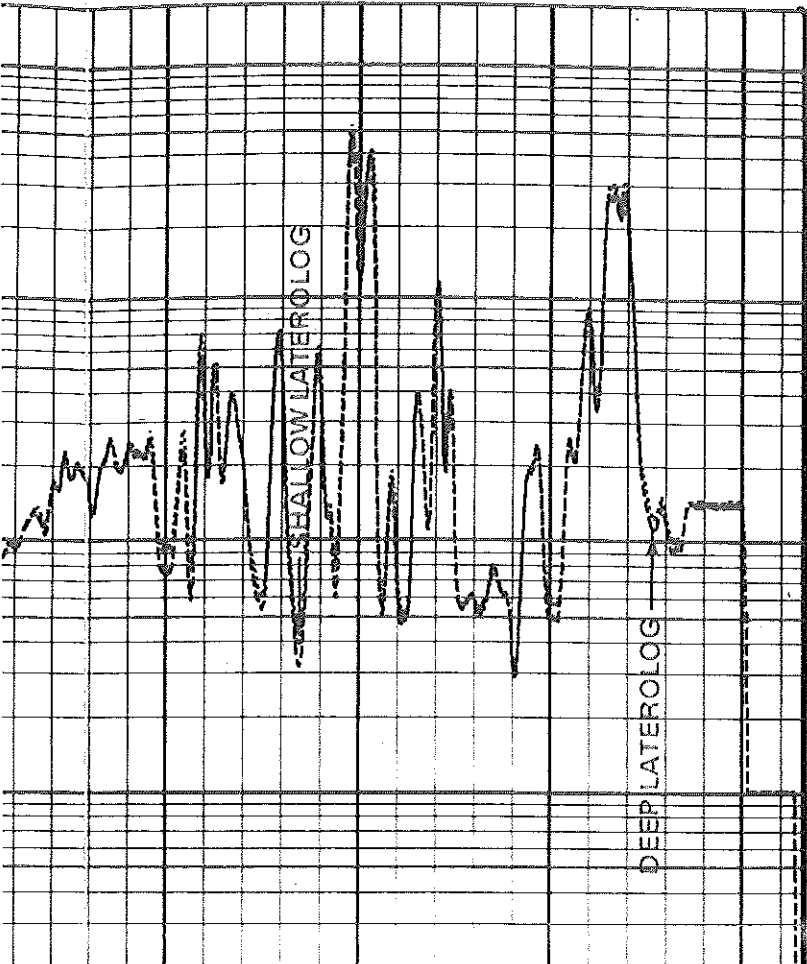
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04200

04300

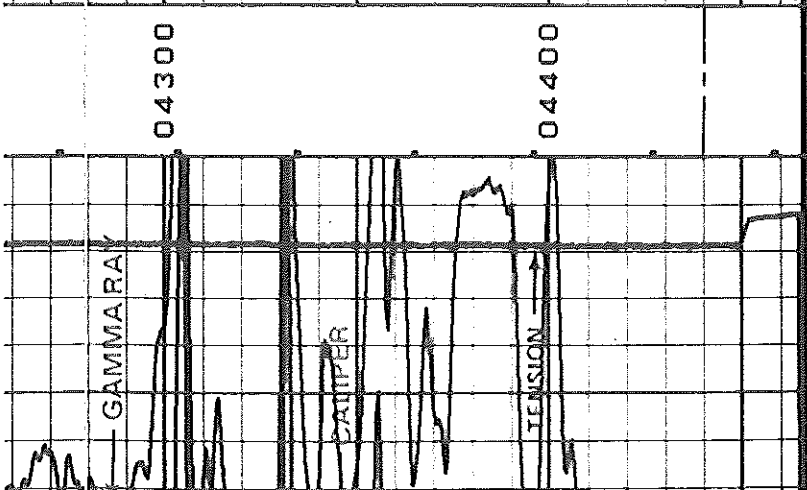


GAMMA RA



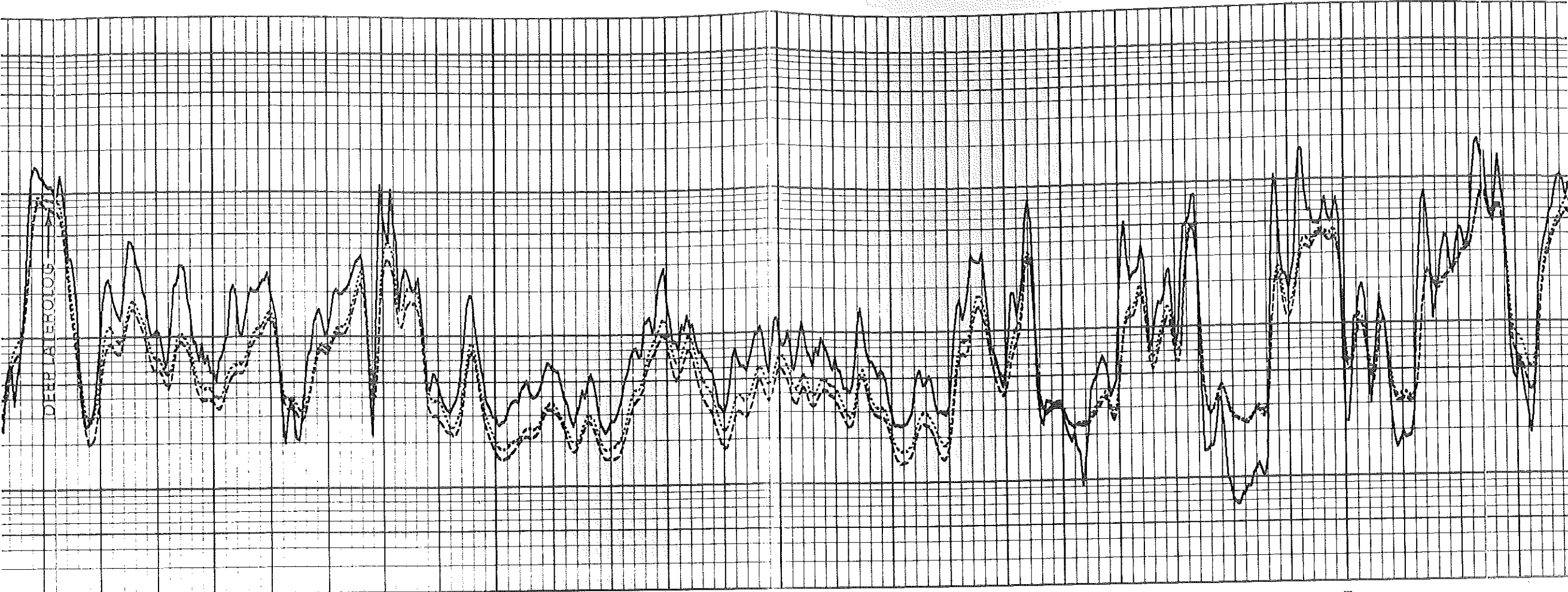
CALIPER . 16
 GR API 150
 0.2 R(LLS) Ω -M 2000
 0.2 R(LLD) Ω -M 2000

08:15 4465.0 322422 0093-60 0 0001-19 0
 08:51 3489.0 322422 0093-60 0 0001-19 3



CALIPER . 16
 GR API 150
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 0.2 R(LLS) Ω -M 2000
 0.2 R(LLD) Ω -M 2000

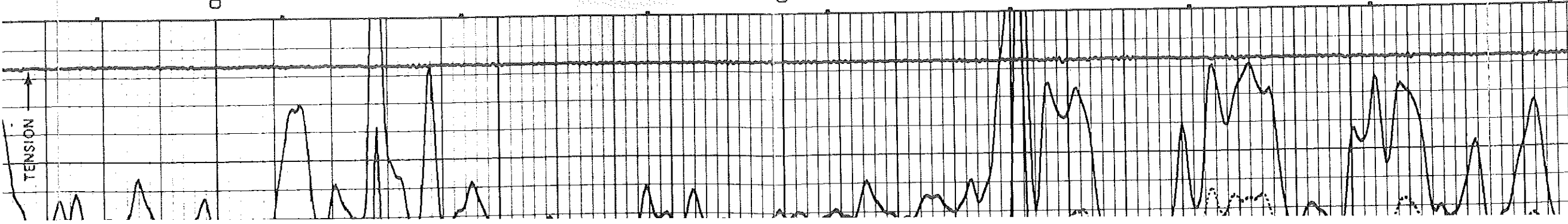
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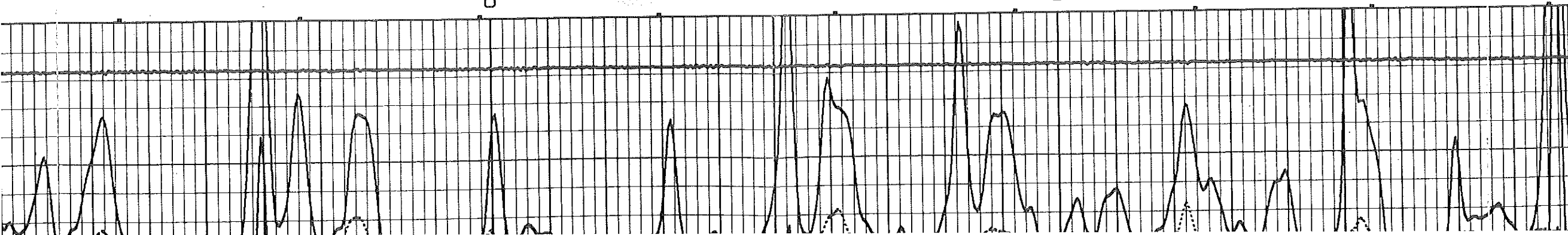
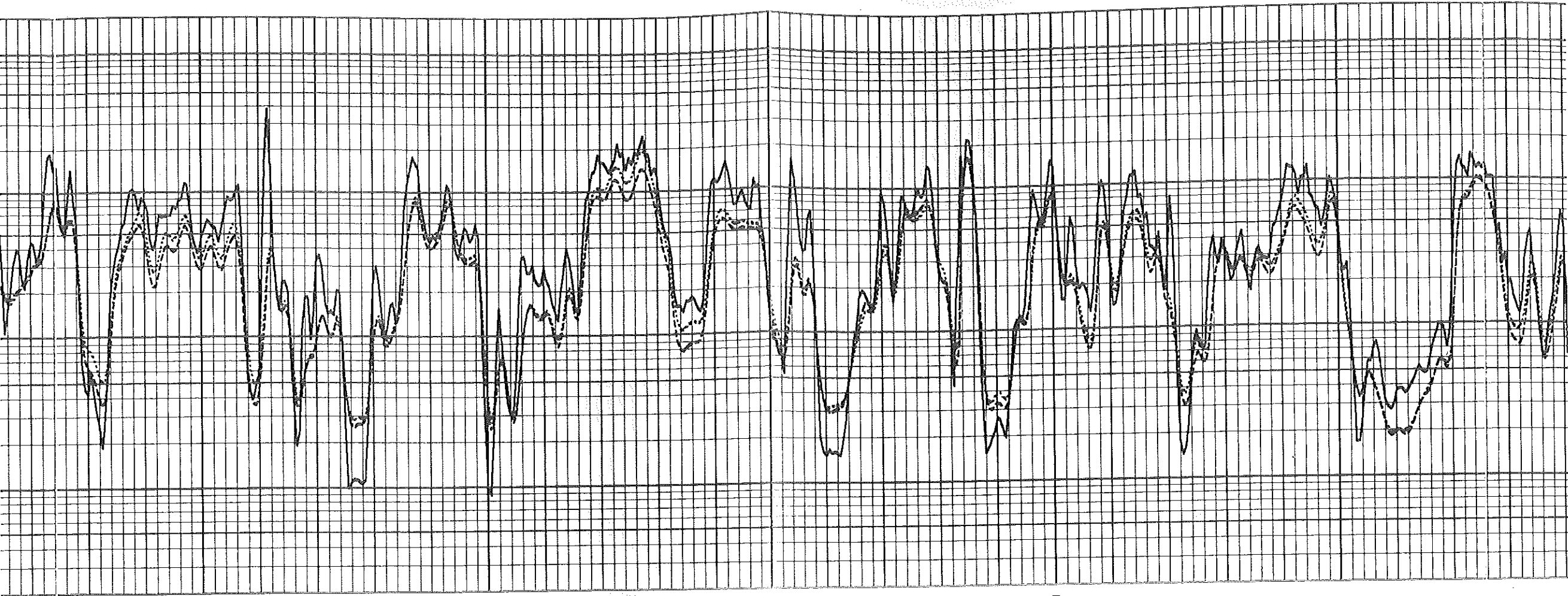


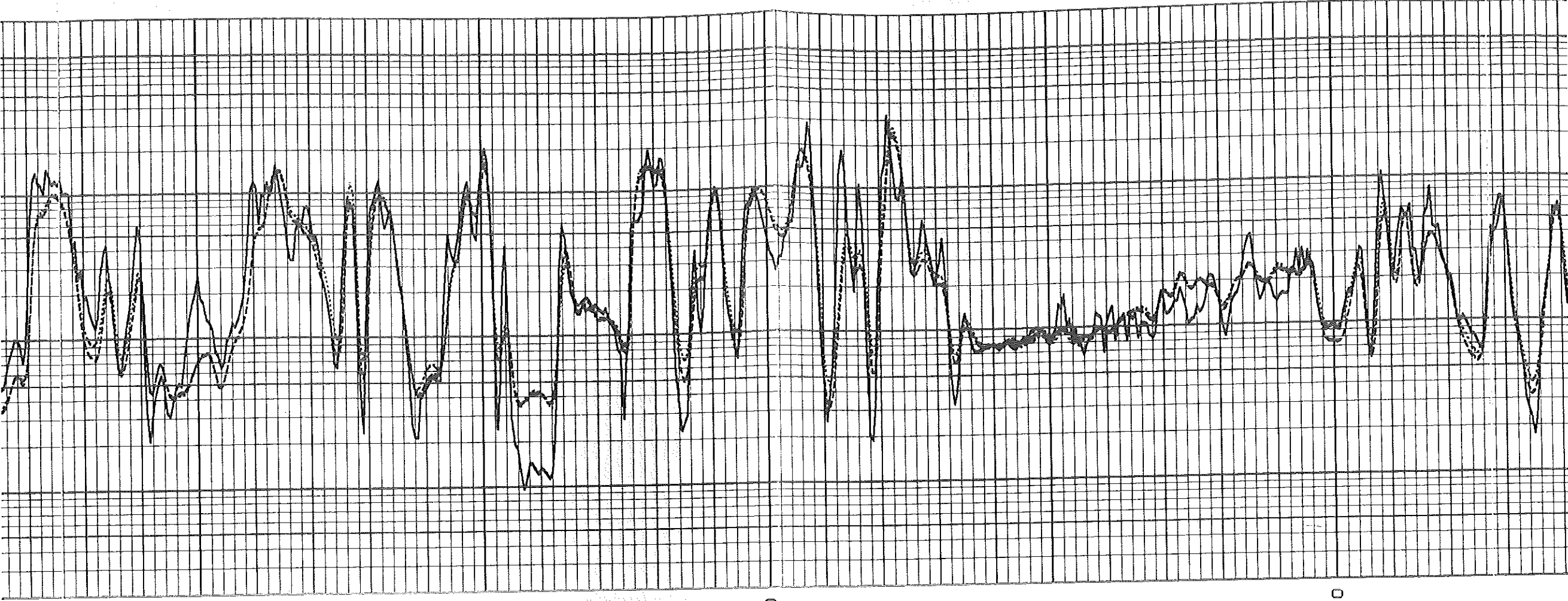
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03700

03800



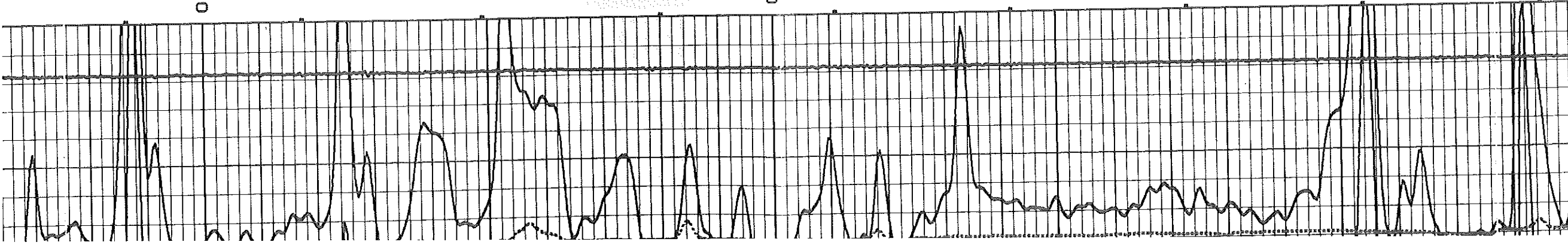


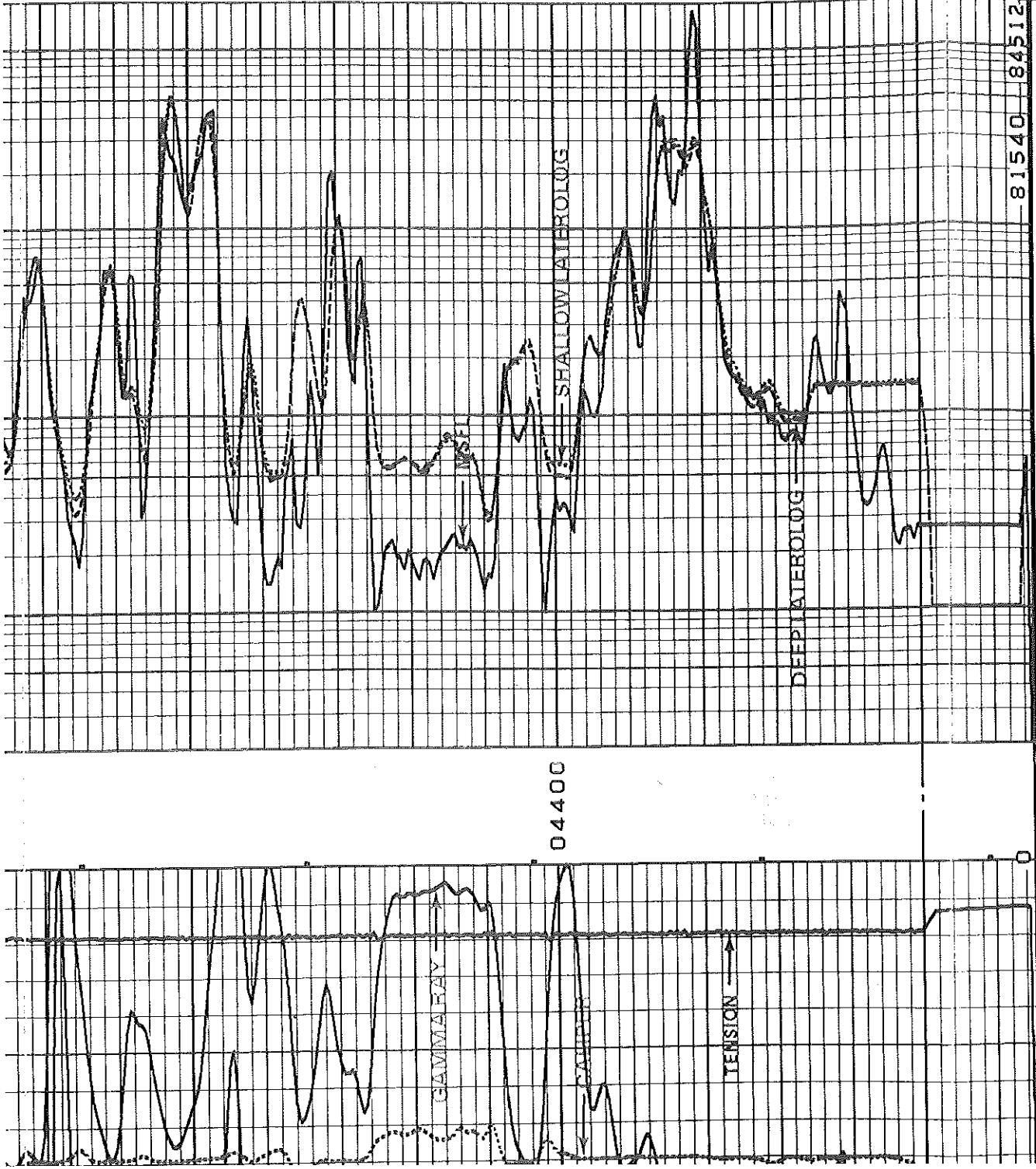


04100

04200

04300





CALIPER 16
 GR API 150

0.2 R (RXO) Ω-M 2000
 0.2 R (LLS) Ω-M 2000
 0.2 R (LLD) Ω-M 2000

-30-85 08:15 4465.0 322422 0093-60 0 0001-19 3

Company SOUTHERN STATES OIL COMPANY
 well MAUCH NO. 1-16
 field EAST PAWNEE VALLEY
 county NESS State KANSAS
 GO FR 4440
 GO TD 4454
 DRLR TD 4450
 Elev: KB 2276
 DF 2276
 GL 2272

-30-85 08:11 4243.0 322422 0093-60 0 0001-19 2

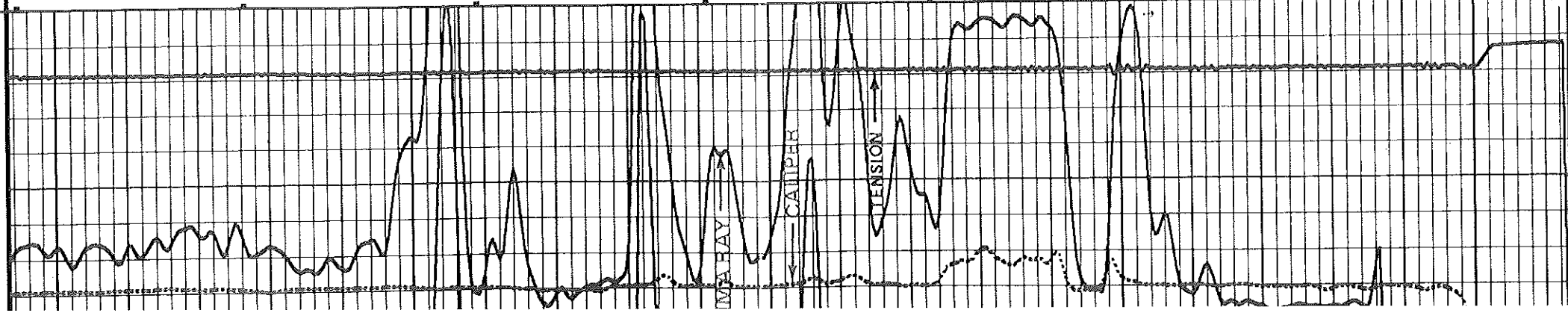
CALIPER 16
 GR API 150

0.2 R (RXO) Ω-M 2000
 0.2 R (LLS) Ω-M 2000
 0.2 R (LLD) Ω-M 2000

REPEAT SECTION

CALIPER 16

GR API 150



CALIPER 16

GR API 150

0.2

0.2

0.2

R(RXO) Ω-M

R(LLS) Ω-M

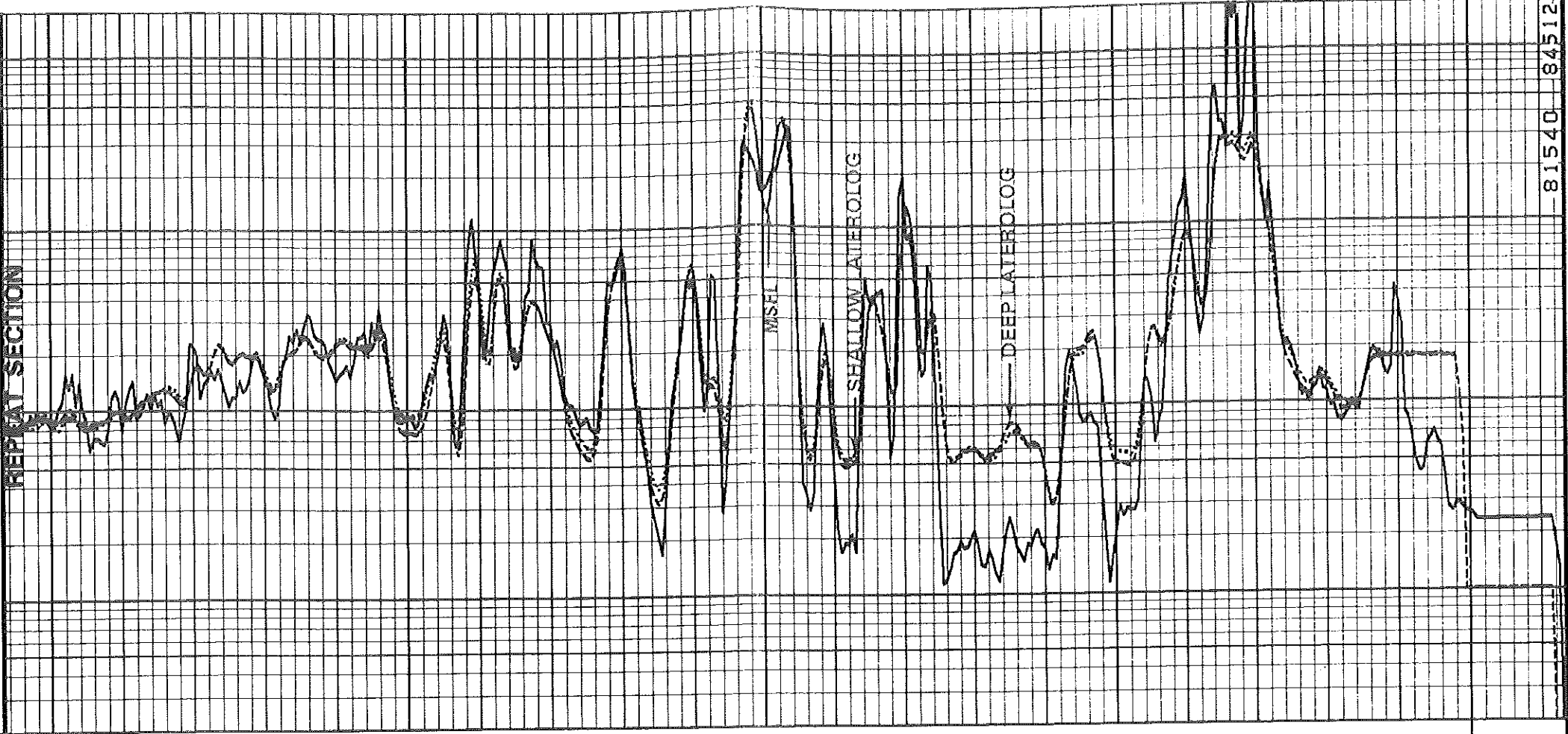
R(LLD) Ω-M

2000

2000

2000

REPEAT SECTION



0.2

0.2

R(RXO) Ω-M

R(LLS) Ω-M

2000

2000

04300

04400

-81540 84512

CALIPER	16	0.2	R(RXO) Ω-M	2000
GR API	150	0.2	R(LLS) Ω-M	2000
		0.2	R(LLD) Ω-M	2000

7-30-85	08:05	4463.0	322422	0093-60	0	0001-19	2
7-30-85	09:46	543.5	322422	0093-60	0	0001-19	0

UMMA RAY

BACKGROUND	CALIBRATOR	STANDARD	UNITS
152.2	610.6	140.0	GAPI

DELTA COUNTS PER SEC: 458.4 CPS/API = 3.274

7-30-85	07:35	543.5	322422	0093-60	0	0001-19	0
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MICRO-SPHERICALLY FOCUSED BEFORE SURVEY CALIBRATION

RESISTIVITY

MEASURED	CALIBRATED
LOW	LOW
HIGH	HIGH
UNITS	UNITS
MSFL 1.0	502.0
	0.0
	499.9
	MM/M

7-30-85	07:35	543.5	322422	0093-60	0	0001-19	0
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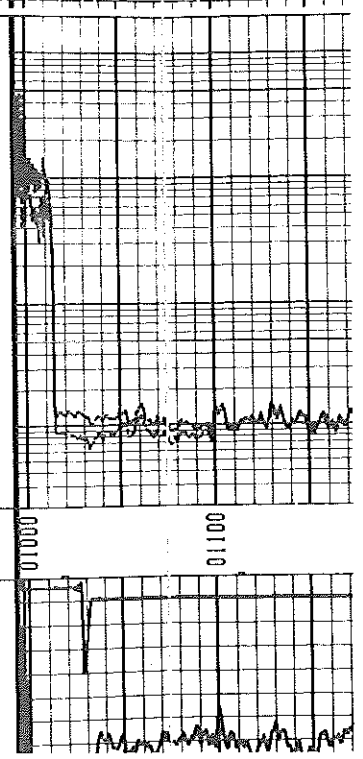
DUAL LATEROLOG BEFORE SURVEY CALIBRATION

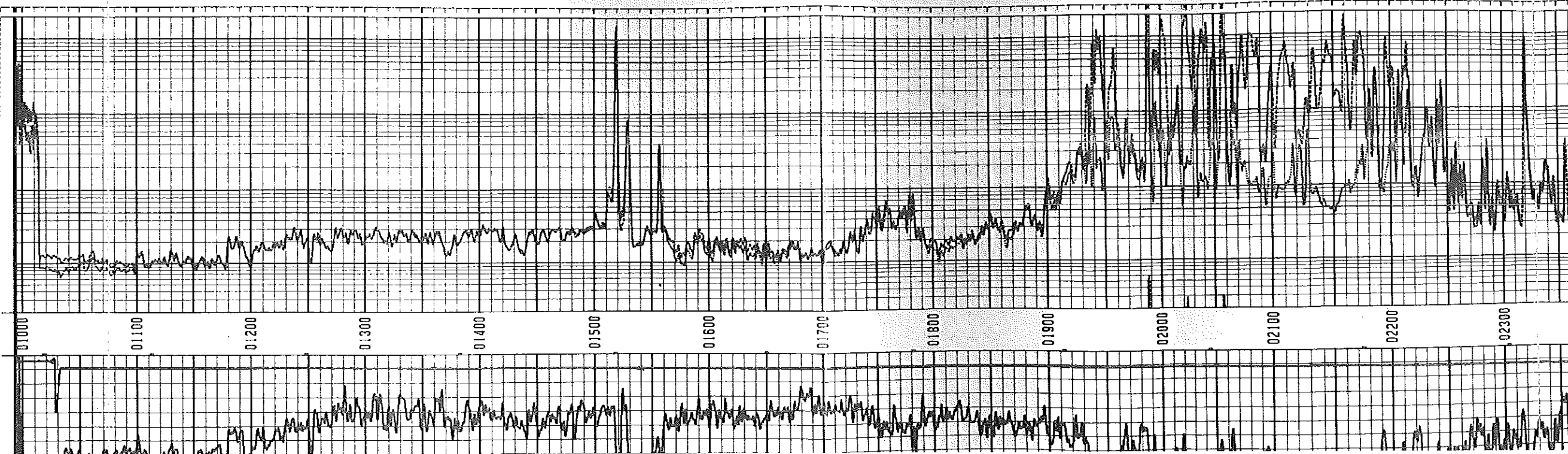
100 OHM-METER CAL

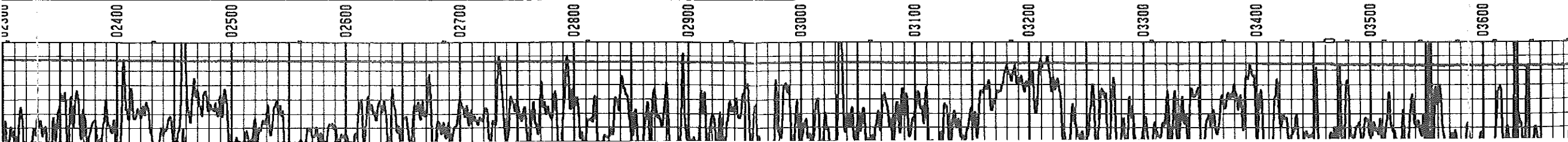
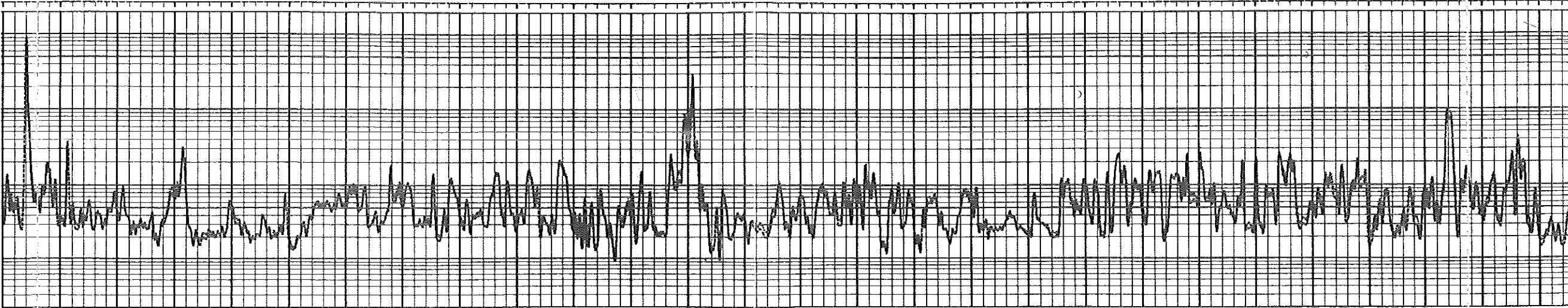
	MEASURED	CALIBRATED	UNITS
LLD	111	100	OHM-M
LLS	109	100	OHM-M

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GR API	150	0.2	R(LLS) Ω-M	2000
		0.2	R(LLD) Ω-M	2000







02300

02400

02500

02600

02700

02800

02900

03000

03100

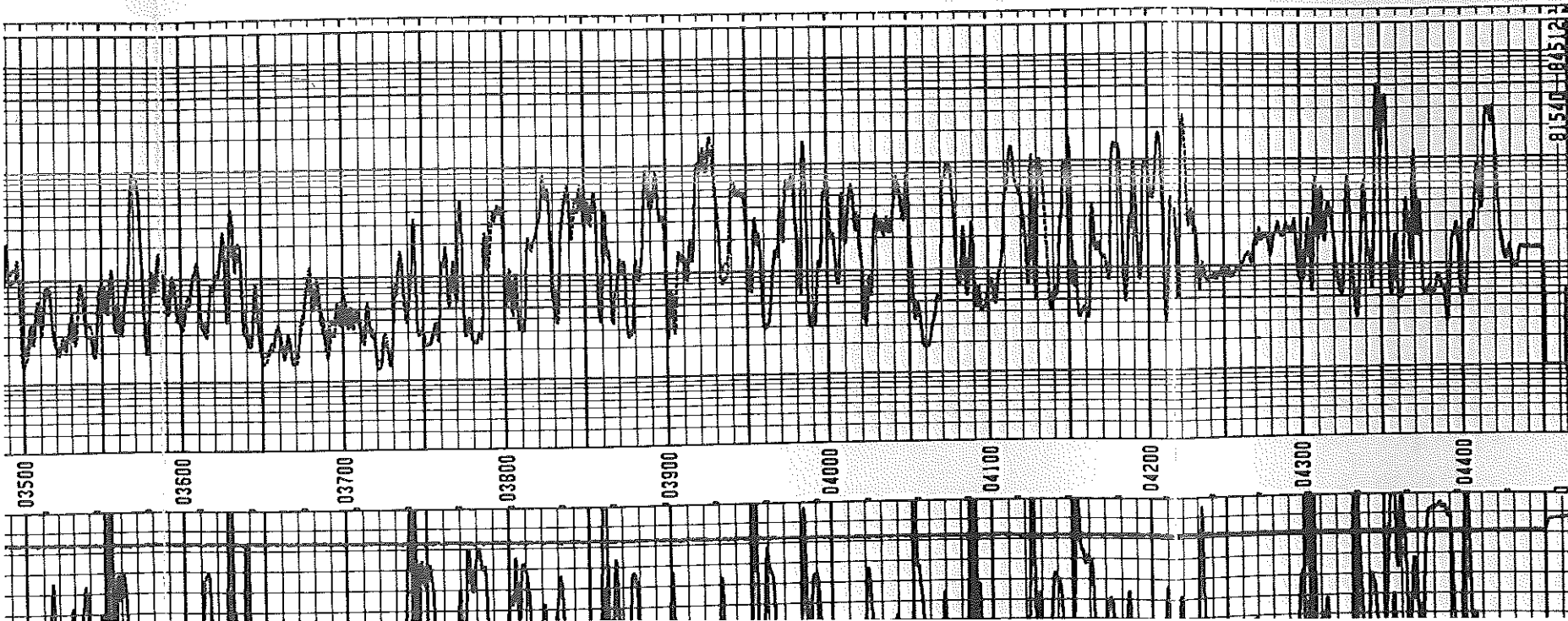
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03300

03400

03500

03600



SR API 150	0.2	R(LLS) P-N	2000)
	0.2	R(LLD) P-N	2000)
35 08:17 4465.0 322422 0093-60 0 0001-19 3			

Michelle Henning

From: Angie Coady
Sent: Monday, November 25, 2013 4:26 PM
To: Michelle Henning
Subject: RE: Mauch #1-16 and Mauch #2-26 SWD

Michelle,

Surface ownership of the S/2NE/4 of 16-20S-23W, Ness is shared among the following:

Cynthia Ummel Special Needs Trust

Jay Ummel, Trustee

1919 W 2nd

North Platte, NE 69101

Tye Mauch

8A Kyeburn Place

Christchurch 8042

New Zealand

Douglas R. and Harriet J. Petersilie

17390 40 Rd

Ness City, KS 67560

ANgie

From: Michelle Henning
Sent: Monday, November 25, 2013 4:10 PM
To: Angie Coady
Subject: Mauch #1-16 and Mauch #2-26 SWD

Angie

Who is the surface owner on the Margheim #1 and #2? We are filing plugging applications for both.

#1 – E/2 NW SE Sec. 16-20S-23W

#2 – C NE SE Sec. 16-20S-23W

Thanks

Michelle

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 26, 2013

Casey Coats
Vess Oil Corporation
1700 WATERFRONT PKWY BLDG 500
WICHITA, KS 67206-6619

Re: Plugging Application
API 15-135-22878-00-00
MAUCH 1-16
SE/4 Sec.16-20S-23W
Ness County, Kansas

Dear Casey Coats:

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 25, 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 1

(620) 225-8888