

### KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1178057

Form CP-1
March 2010
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 #:		API No.	15		
Name:		If pre 19	967, supply original compl	etion date:	
Address 1:		Spot De	scription:		
Address 2:			Sec Tw	p S. R	East West
City: State:	Zip: +		Feet from	North / S	South Line of Section
Contact Person:			Feet from	East / W	Vest Line of Section
Phone: ( )		Footage	es Calculated from Neares		Corner:
Filone. ( )		Causatiu	NE NW	SE SW	
			lame:		
		Ecase iv	idilic.	Woll #.	
Check One: Oil Well Gas Well OG	D&A C	Cathodic Wate	er Supply Well O	ther:	
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:					
Condition of Well: Good Poor Junk in Hole  Proposed Method of Plugging (attach a separate page if addit	Casing Leak at:tional space is needed):	(Interval)		Stone Corral Formation)	'
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.					
Company Representative authorized to supervise plugging	•				
Address:			State:	Zip:	+
Phone: ( )					
Plugging Contractor License #:					
Address 1:					
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

### CORRECTION #1

Kansas Corporation Commission Oil & Gas Conservation Division 1178057

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 (C	Cathodic Protection Borehole Intent) T-1 (Transfer) CP-1 (Plugging Application)		
OPERATOR: License #	Well Location:		
Name:	SecTwpS. R 🔲 East 🗌 West		
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		
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 addition		
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:			
the KCC with a plat showing the predicted locations of lease roads, tank	dic Protection Borehole Intent), you must supply the surface owners and a batteries, pipelines, and electrical lines. The locations shown on the plat in the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.		
owner(s) of the land upon which the subject well is or will be lo	ct (House Bill 2032), I have provided the following to the surface ocated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address.		
	cknowledge that, because I have not provided this information, the vner(s). To mitigate the additional cost of the KCC performing this fee, payable to the KCC, which is enclosed with this form.		
If choosing the second option, submit payment of the \$30.00 handling form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-	fee with this form. If the fee is not received with this form, the KSONA-1 will be returned.		
Submitted Electronically			

## **Summary of Changes**

Lease Name and Number: Startz 9-13 API/Permit #: 15-001-30814-00-00

Doc ID: 1178057

Correction Number: 1			
Field Name	Previous Value	New Value	
API	15-001-30530-00-00	15-001-30814-00-00	
Elevation	998	1008	
LocationInfoLink	https://solar.kgs.ku.edu/ kcc/detail/locationInform ation.cfm?section=14&t	https://solar.kgs.ku.edu/ kcc/detail/locationInform ation.cfm?section=14&t 1890	
Number of Feet East or West From Section Line	2140		
Number of Feet North or South From Section Line	2090	1840	
Production Casing Cemented With	155	25	
Production Casing Set At	1240	1258	
Quarter Call 3	NE	SW	
Quarter Call 4 - Smallest	SW	NE	
Save Link	//kcc/detail/operatorE ditDetail.cfm?docID=11	//kcc/detail/operatorE ditDetail.cfm?docID=11	
Surface Casing Set At	77999 20	78057 22	

# Summary of changes for correction 1 continued

Field Name	Previous Value	New Value
Total Depth	1242	1262
Well Number	4-12	9-13