



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 must provide the name and address of the surface owner by filling out the top section of this form and 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.

I Submitted Electronically

Form	CP1 - Well Plugging Application
Operator	Sirius Energy Corp.
Well Name	EWING B X-5
Doc ID	1188923

Perforations And Bridge Plug Sets

Perforation Top	Perforation Base	Formation	Bridge Plug Depth
607	647	Squirrel sand	

H & G Pulling & Rotary Drilling, Inc.

Affidavit

13-21-20E

Phone: 365-3981 or 6005
Office: 365-7791

State Geological Survey WICHITA, BRANCH

P.O. Box 158
Iola, Kansas 66749

E.O.R. Petroleum
Lease; Ewing
Well # x-5
Anderson County

THICKNESS	FORMATION	TOTAL DEPTH
2	soil	2
13	clay	15
31	shale, w/lime str.	46
19	lime, w/shale str.	65
14	shale	79
2	shale, black	81
37	shale, w/lime str.	118
3	lime	121
19	shale	140
8	lime	148
6	shale	154
5	lime	159
2	shale, dark	161
32	lime, sandy	193
11	shale	204
20	lime	224
3	shale, black	227
186	shale	413
2	red bed	415
6	lime, w/shale str.	421
10	lime, brown	431
55	shale	486
13	lime	499
11	shale	510
4	lime	514
25	shale	539
9	lime	548
19	shale, w/lime str.	567
4	lime	571
16	shale, w/lime str.	587
2	shale, black	589
4	shale, white	593
8	shale, sandy	601
8	shale, sandy, w/slight laminations	609
3	shale, sandy, w/better laminations	612
2	OIL SAND, w/slight lamiantions	614
15½	shale, sandy, w/sand laminations	629½
2	OIL SAND	631½
5	shale, sandy, w/slight laminations	636½
3½	OIL SAND	640
4	shale, w/slught sand laminations	644
1	OIL SAND	645
3	OIL SAND	648
22	shale, dark, sandy	670
	T.D.	670

Set 45 ft of 6¼" surface...

(over)

13-21-

Core # 1, from 615 to 632....

Core # 2, from 632 to 652....

Run 670 ft. of 2½" regular tubing, with seating nipple at 608...

commenced drilling 10-28-81
completed drilling 10-30-81



OIL WELL LOGGERS, INC.

Chanute, Kansas

GAMMA RAY NEUTRON

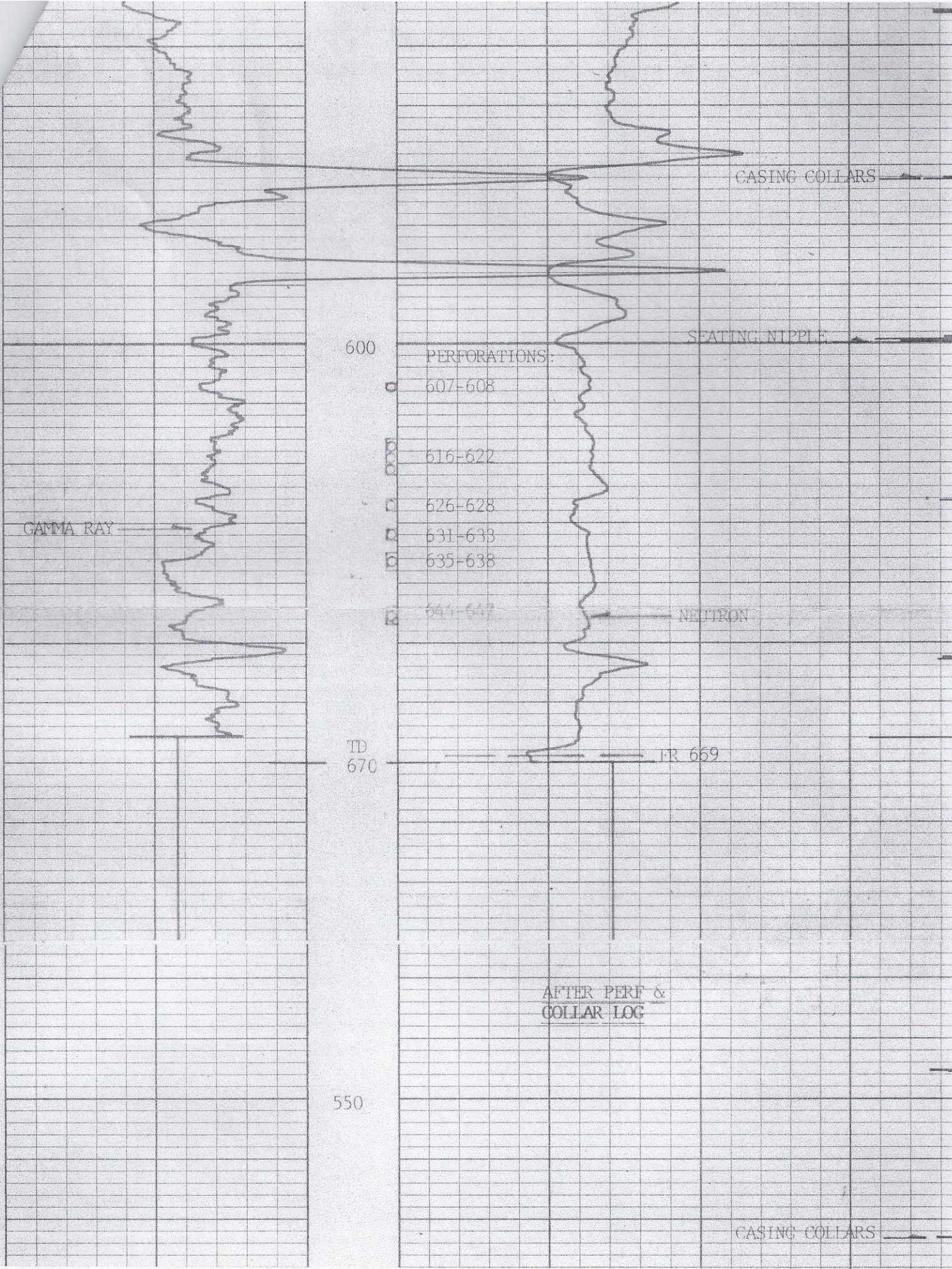
FILE NO.	COMPANY <u>FOR PETROLEUM COMPANY</u>		
API WELL NO.	WELL <u>EWING "B" #X-5</u>		
<i>7740 F.</i>	FIELD <u>EWING "B"</u>		
	COUNTY <u>ANDERSON</u>	STATE <u>KANSAS</u>	
	LOCATION: SEC _____ TWP _____ RGE _____		Other Services <u>PERF.</u>

Permanent Datum <u>G.L.</u>	Elev. _____	KB _____
Log Measured from <u>G.L.</u>	Ft. Above Permanent Datum _____	DF _____
Drilling Measured from <u>G.L.</u>		GL _____

Date	<u>11-3-81</u>		
Run No.	<u>ONE</u>		
Service Order No.	<u>01090</u>		
Depth-Driller	<u>670</u>		
Depth-Logger	<u>670</u>		
Bottom Logged Interval	<u>669</u>		
Top Logged Interval	<u>200</u>		
Type Fluid in Hole	<u>WATER</u>		
Salinity ppm Cl.			
pH and Fluid Loss		cc	cc
Density Lb./Gal.			
Level	<u>FULL</u>		
Max. Rec. Temp. Deg. F			
Opr. Rig Time			
Recorded By	<u>D. HOWARD & G. SPOHR</u>		
Witnessed By	<u>MR. MARVIN</u>		

Run Bore Hole Record				Casing Record			
No.	Bit	From	To	Size	Wgt.	From	To
				<u>2 7/8</u>		<u>SURF.</u>	<u>TD</u>

THIS HEADING AND LOG CONFORM TO API RP 33



500

600

CORNA RAY

TD
670

FR 669



February 12, 2014

Craig Walford
Sirius Energy Corp.
526 COUNTRY PL, SOUTH
ABILENE, TX 79606-7032

Re: Plugging Application
API 15-003-21723-00-00
EWING B X-5
NE/4 Sec.13-21S-20E
Anderson County, Kansas

Dear Craig Walford:

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, 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