



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

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 33741
Name: Energex Kansas, Inc. (formerly Midwest Energy, Inc.)
Address: Commerce Plaza 1 Center, 7300 W. 110th Street, 7th Floor
City/State/Zip: Overland Park, KS 66210
Purchaser: _____
Operator Contact Person: Marcia Littell
Phone: (913) 693.4608
Contractor: Name: Thornton Air Rotary, LLC
License: 33606

Wellsite Geologist: David C. Smith
Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SLOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Re-entry: Old Well Info as follows:
Operator: _____

Well Name: _____
Original Comp. Date: _____ Original Total Depth: _____
 Deepening Re-perf. Conv. to Enhr./SWD
 Plug Back Plug Back Total Depth
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Enhr.?) Docket No. _____

10/05/07	10/08/07	10/10/07
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 001-29639-0000
County: Allen
SW SW NW SW Sec. 36 Twp. 24 S. R. 17 East West
2047 feet from S / (circle one) Line of Section
450 feet from E / (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Kipp Well #: 1
Field Name: Iola

Producing Formation: Cherokee Coals
Elevation: Ground: 1050' Kelly Bushing: _____
Total Depth: 1280' Plug Back Total Depth: 1270'
Amount of Surface Pipe Set and Cemented at 22 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from 1270
feet depth to surface w/ 140 sx cmt.

Drilling Fluid Management Plan Alt. II SB
(Data must be collected from the Reserve Pit) 3-24-08
Chloride content _____ ppm Fluid volume _____ bbls
Dewatering method used _____
Location of fluid disposal if hauled offsite: _____
Operator Name: _____
Lease Name: _____ License No.: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
County: _____ Docket No.: _____

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form (see rule 82-3-107 for confidentiality in excess of 12 months). One copy of all wireline logs and geologist well report shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Signature: Marcia Littell
Title: Compliance Coordinator Date: 01/22/08
Subscribed and sworn to before me this 22nd day of JANUARY,
2008
Notary Public: Maureen Eiton
Date Commission Expires: 9/18/2010

KCC Office Use ONLY

Letter of Confidentiality Received
 If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 DIC Distribution

RECEIVED
KANSAS CORPORATION COMMISSION
JAN 23 2008
CONSERVATION DIVISION
WICHITA, KS

Maureen Eiton
Notary Public State of Kansas
My Appl Expires 9/18/2010

Operator Name: Energex Kansas, Inc. (formerly Midwest Energy, Inc.) Lease Name: Kipp Well #: 1
 Sec. 36 Twp. 24 S. R. 17 East West County: Allen

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface test, along with final chart(s). Attach extra sheet if more space is needed. Attach copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: Gamma Ray/Neutron, Dual Induction, Differential Temperature Density-Neutron Hi-Resolution Density	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
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CASING RECORD <input checked="" type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
Surface	12 1/4"	8 5/8"	24#	22'	Portland	4	
Production	6 3/4"	4 1/2"	9.5#	1270'	O.W.C.	140	8# kol-seal

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
___ Perforate				
___ Protect Casing				
___ Plug Back TD				
___ Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated		Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>		Depth

TUBING RECORD		Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr.			Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)		
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

Disposition of Gas	METHOD OF COMPLETION	Production Interval
<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	RECEIVED KANSAS CORPORATION COMMISSION JAN 23 2008 CONSERVATION DIVISION WICHITA, KS

Air Drilling
Specialist
Oil and Gas Wells

THORNTON AIR ROTARY, LLC
Office Phone: (620) 879-2073

P.O. Box 449
Caney, KS 67333

Operator MIDWEST ENERGY, INC.		Well No. 1	Lease KIPP	Loc. 1/4 1/4 1/4	Sec. 36	Twp. 24	Rge. 17E					
County ALLEN		State KS		Type/Well	Depth 1280'	Hours	Date Started 10/5/07	Date Completed 10/8/07				
Job No.	Casing Used 22' 8 5/8"	Return to surface			Bit Record		Coring Record					
Driller SEAN	Cement Used 4 - Portland	Bit No.	Type	size	From	To	Bit No.	type	Size	From	To	% Rec.
Driller	Rig No.			6 3/4"								
Driller	Hammer No.											

Formation Record

From	To	Formation	From	To	Formation	From	To	Formation	From	To	Formation
0	1	DIRT	740	743	BLACK SHALE						
1	7	CLAY	743	765	SHALE						
7	24	LIME	762		GAS TEST (5# 1/4")			T.D. 1280'			
24	152	SHALE	765	788	LIME (OSWEGO)						
152	170	LIME	788	798	BLACK SHALE (SUMMIT)						
170	203	SHALE	798	802	LIME						
203	251	LIME (WET)	812		GAS TEST (SAME)						
236		WENT TO WATER	802	820	BLACK SHALE (MULKEY)						
251	289	SHALE	820	881	SANDY SHALE						
289	295	LIME	837		GAS TEST (SAME)						
295	319	SHALE	881	922	SHALE						
319	380	LIME	922	923	COAL						
380	384	BLACK SHALE	932	943	SHALE						
384	443	LIME	937		GAS TEST (SAME)						
443	450	SHALE	943	944	COAL						
450	509	SANDY SHALE	944	981	SHALE						
509	530	SAND	981	982	COAL						
530	580	SANDY SHALE	982	1007	SHALE						
580	605	SHALE	1007	1008	COAL						
605	606	COAL ?	1008	1047	SHALE						
606	608	SHALE	1012		GAS TEST (SAME)						
608	624	LIME	1047	1060	SAND						
624	628	LIMEY SHALE	1060	1065	SANDY SHALE						
628	640	LIME	1065	1102	SAND						
640	650	SHALE	1102	1122	SHALE						
650	673	SAND	1122	1179	CHAT / BROWN SAND						
673	712	SANDY SHALE	1179	1180	COAL						
712	714	LIME	1180	1210	CHAT (MISSISSIPPI)						
714	715	COAL (MULBERRY)	1187		GAS TEST (SAME)						
715	740	LIME (PAWNEE)	1210	1280	BROWN LIME /CHERT						
737		GAS TEST (SLIGHT BLOW)	1280		GAS TEST (5# 1/4")						

RECEIVED
KANSAS CORPORATION COMMISSION
JAN 23 2008
CONSERVATION DIVISION
WICHITA, KS

P.O. BOX 884, CHANUTE, KS 66720
620-431-9210 OR 800-467-8676

LOCATION FOREXA
FOREMAN RICK LEONARD ✓

TREATMENT REPORT & FIELD TICKET

CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
10-10-07		KIPP #1	36	24	17E	Allen
CUSTOMER			TRUCK #	DRIVER	TRUCK #	DRIVER
MIDWEST Energy Inc			463	Kyle		
MAILING ADDRESS			4515	Jarrod		
Commerce Plaza, Apt 201, 7300 S. 46th St, Overland Park, KS 66210						
CITY						

JOB TYPE longstring HOLE SIZE 6 3/4" HOLE DEPTH 1280' CASING SIZE & WEIGHT 4 1/2" 9.5"

CASING DEPTH 1270' DRILL PIPE TUBING OTHER

SLURRY WEIGHT 13.8 SLURRY VOL 390 Bbl WATER gal/sk 8.0 CEMENT LEFT in CASING 0'

DISPLACEMENT 20.5 Bbl DISPLACEMENT PSI 700 MISC PSI 1200 RATE

REMARKS: Safety meetings @ 4 1/2 casing. Wash down 350 Co. T.D.
 @ 13.8 @ 1200 psi yield 2.5.8 shut dam wash out plug + lines release plug
 @ 1200 psi fresh water. Final pump pressure 700 PSI. Plug
 cement returns to surface @ 1270' slurry to pit. Job complete. Rig down
 TAG float shoe @ 1270'

ACCOUNT CODE	QUANTITY OF UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL	
5401		PUMP CHARGE	840.00	840.00	
5406	40	MILEAGE	3.30	132.00	
1126	1140	Q.W.C. cement	15.40	17556.00	
1110A	1120	Kol-seal 8" / 1/2"	38	42560.00	
1128A	300	gel-flush	15	4500.00	
1105	50	hulls	36	1800.00	
5407A	7.38	ton-mileage bulk tank	1.10	826.32	
4404	1	4 1/2 top rubber plug	40.00	40.00	
1142		KCC	26.00	26.00	
RECEIVED KANSAS CORPORATION COMMISSION JAN 23 2008 CONSERVATION DIVISION WICHITA, KS					
				subtotal	4002.92
				SALES TAX	
				ESTIMATED TOTAL	

March 17, 2014

Amy McFadden
Enerjex Kansas, Inc.
2038 S. PRINCETON ST., STE B
OTTAWA, KS 66067

Re: Plugging Application
API 15-001-29639-00-00
KIPP 1
NW/4 Sec.36-24S-17E
Allen County, Kansas

Dear Amy McFadden:

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 September 13, 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