

Kansas Corporation Commission Oil & Gas Conservation Division

1195667

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 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				
		County:					
		1 1	ame:				
Check One: Oil Well Gas Well OG	D&A Ca	athodic Wate	er Supply Well)ther:			
SWD Permit #:				Permit #:			
Conductor Casing Size:	Set at:						
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 addi	Casing Leak at:tional space is needed):	(Interval)		Stone Corral Formatio	n)		
Is Well Log attached to this application? Yes No	ls ACO-1 filed?	Vos 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 of son and the	a Rules and Regu	lations of the State Core	noration Commi	ssion		
Company Representative authorized to supervise plugging							
Address:	•						
Phone: ()		,-					
Plugging Contractor License #:		Name:					
Address 1:							
City:							
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



Kansas Corporation Commission Oil & Gas Conservation Division

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Form KSONA-1
January 2014
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)			
OPERATOR: License #	Well Location:			
Name:				
Address 1:	County:			
Address 2:	Lease Name: Well #:			
City:	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:			
Contact Person:				
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, tan	odic Protection Borehole Intent), you must supply the surface owners and the batteries, pipelines, and electrical lines. The locations shown on the plat on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.			
I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be	Act (House Bill 2032), I have provided the following to the surface located: 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.			
KCC will be required to send this information to the surface of	acknowledge that, because I have not provided this information, the wner(s). To mitigate the additional cost of the KCC performing this s of the surface owner by filling out the top section of this form and 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	g fee with this form. If the fee is not received with this form, the KSONA-1 -1 will be returned.			
Submitted Electronically				
I	_			

Form	CP1 - Well Plugging Application	
Operator	Val Energy, Inc.	
Well Name	JLB RANCH 'A' 1-35	
Doc ID	1195667	

Perforations And Bridge Plug Sets

Perforation Top	Perforation Base	Formation	Bridge Plug Depth
2938	3050	MISS	

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/

Sam Brownback, Governor

Shari Feist Albrecht, Chair Thomas E. Wright, Commissioner Jay Scott Emler, Commissioner

March 25, 2014

DUSTIN WUER Val Energy, Inc. 200 W DOUGLAS AVE STE 520 WICHITA, KS 67202-3005

Re: Plugging Application API 15-015-23983-00-00 JLB RANCH 'A' 1-35 NE/4 Sec.35-29S-05E Butler County, Kansas

Dear DUSTIN WUER:

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 21, 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 2

(316) 630-4000