



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	Farmer, John O., Inc.
Well Name	Krug C 7
Doc ID	1199357

Perforations And Bridge Plug Sets

Perforation Top	Perforation Base	Formation	Bridge Plug Depth
2878	2882	Topeka	
2888	2890	Topeka	

CERTIFICATION OF COMPLIANCE WITH THE
KANSAS SURFACE OWNER NOTIFICATION ACT

**Krug "C" #7
E2 SW SE SE
Sec. 4-14S-14W
Russell County, Kansas**

Form KSONA-1 Surface Owners (Continued)

Daniel W. Krug
414 St. John Street
Russell, KS 67665

Pauline E. Alksnis
c/o Maria Grimes
1602 Portola Street
Davis, CA 95616

RECEIVED

JAN 23 1991

SIDE ONE

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
ACO-1 WELL HISTORY
DESCRIPTION OF WELL AND LEASE

Operator: License # 3386
Name: Leavell Resources Corporation
Address 1032 E. Hwy 40 P.O. Box 308
City/State/Zip Hays, s KS 67601
Purchaser: FARMLAND INDUSTRIES
Operator Contact Person: Russ Leavell
Phone (913) -628-3324

Contractor: Name: Emphasis Oil Operation
License: 8241
Wellsite Geologist: Brad Hutchison

Designate Type of Completion
 New Well Re-Entry Workover
 Oil SWD Temp. Abd.
 Gas Inj Delayed Comp.
 Dry Other (Core, Water Supply, etc.)

If OWMO: old well info as follows:
Operator: _____
Well Name: _____
Comp. Date _____ Old Total Depth _____

Drilling Method:
 Mud Rotary Air Rotary Cable
1/12/91 1/19/91 2/14/91
Spud Date Date Reached TD Completion Date

API NO. 15- 167-22,955
County Russell
Approx. SW SE SE Sec. 4 Twp. 14S Rge. 14 East West
330 Ft. North from Southeast Corner of Section
880 Ft. West from Southeast Corner of Section
(NOTE: Locate well in section plat below.)
Lease Name Krug Well # 7
Field Name _____
Producing Formation Topeka
Elevation: Ground 1840' KB 1845'
Total Depth 3300' PBTD _____

RECEIVED
APR 11 1991
CONSERVATION DIVISION
Wichita, Kansas
RECEIVED
APR 17 1991
CONSERVATION DIVISION
Wichita, Kansas

	5280
	4950
	4620
	4290
	3960
	3630
	3300
	2970
	2640
	2310
	1980
	1650
	1320
	990
	660
	330



Amount of Surface Pipe Set and Cemented at 223 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from 800
feet depth to surface w/ 225 sx cmt.

INSTRUCTIONS: This form shall be completed in triplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 120 days of the spud date of any well. Rule 82-3-130, 82-3-107 and 82-3-106 apply. Information on 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 drillers time log 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. Any recompletion, workover or conversion of a well requires filing of ACO-2 within 120 days from commencement date of such work.

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 Bruce Gordon
Title Production Vice President Date 4-5-91
Subscribed and sworn to before me this 5 day of April, 19 91.
Notary Public Betty Wilder
Date Commission Expires April 19, 1994

K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
C Drillers Timelog Received
Distribution
 KCC SWD/Rep NGPA
 KGS Plug Other (Specify)



SIDE TWO

Operator Name Leavell RESources Corporation Lease Name Krug Well # 7

Sec. 4 Twp. 14S Rge. 14 East West
 County Russell

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem 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 during test. Attach extra sheet if more space is needed. Attach copy of log.

Drill Stem Tests Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Attach Additional Sheets.) 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 (Submit Copy.)	<p style="text-align: center;">Formation Description</p> <p style="text-align: center;"><input checked="" type="checkbox"/> Log <input type="checkbox"/> Sample</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:60%;">Name</th> <th style="width:20%;">Top</th> <th style="width:20%;">Bottom</th> </tr> </thead> <tbody> <tr> <td>Wire-Tech</td> <td>000</td> <td>3296</td> </tr> <tr> <td>Anhydrite</td> <td>831+1014</td> <td></td> </tr> <tr> <td>Topeka</td> <td>2698-853</td> <td></td> </tr> <tr> <td>Heebner</td> <td>2925-1080</td> <td></td> </tr> <tr> <td>Lans/ KC</td> <td>2984-1139</td> <td></td> </tr> <tr> <td>Reagan Sand</td> <td>3255-1410</td> <td></td> </tr> <tr> <td>L.T.O.</td> <td>3296-1451</td> <td></td> </tr> </tbody> </table>	Name	Top	Bottom	Wire-Tech	000	3296	Anhydrite	831+1014		Topeka	2698-853		Heebner	2925-1080		Lans/ KC	2984-1139		Reagan Sand	3255-1410		L.T.O.	3296-1451	
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CASING RECORD New 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
Production	12 1/4	8 5/8	24#	223	60-40 poz	140	2% gel, 3% cc
	7 7/8	4 1/2	10.5#	3273	60-40 poz	150	10% salt, 5% Gilsol

Shots Per Foot	Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
2	2878-82	4500 Gal 15% Ins	
2	2888-90		

TUBING RECORD Size 2 3/8 Set At 3200 Packer At None Liner Run Yes No

Date of First Production 2/15/91 Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours	Oil	Bbls.	Gas	Mcf	Water	Bbls.	Gas-Oil Ratio	Gravity
	15				110			

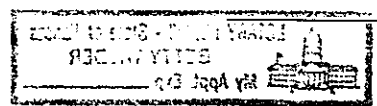
Disposition of Gas: Vented Sold Used on Lease (If vented, submit ACO-18.)

METHOD OF COMPLETION

Open Hole Perforation Dually Completed Commingled

Other (Specify) _____

Production Interval _____



RECEIVED

EMPHASIS OIL OPERATIONS

JAN 23 1991

P. O. BOX 506

RUSSELL, KS 67665

DRILLERS LOG

OPERATOR: Leavell Resources Corporation
1032 E. Hwy 40
Hays, Kansas 67601

CONTRACTOR: Emphasis Oil Operations
Box 506
Russell, KS 67665

LEASE: Krug WELL #7

LOCATION: Approx. SW SE SE
Section 4-14S-14W
Russell County, Kansas

LOGGERS TOTAL DEPTH: 3296'

ROTARY TOTAL DEPTH: 3300'

COMMENCED: 1/12/91

ELEVATION: 1845' K.B.

COMPLETED: 1/19/91

CASING: 8-5/8" @ 223' w/140 sks cement
4-1/2" @ 3273' w/150 sks cement

STATUS: Oil Well

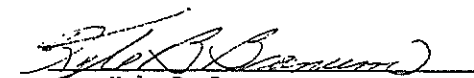
DEPTHS & FORMATIONS

(All measurements from K.B.)

Dakota Sand	150'	Lime	2650'
Red Bed	195'	Lime & Shale	2717'
Cedar Hills	675'	Lime	2900'
Red Bed	711'	Lime & Shale	3191'
Anhydrite	832'	Lime	3248'
Shale	875'	R.T.D.	3300'
Lime & Shale	1540'		

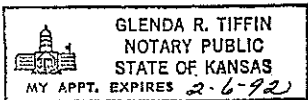
STATE OF KANSAS)
) ss
COUNTY OF RUSSELL)

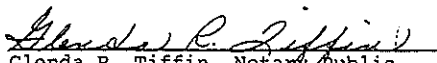
Kyle B. Branum, of Emphasis Oil Operations, states that the above and foregoing is a true and correct log of the above captioned well, to the best of his knowledge.


Kyle B. Branum

Subscribed and sworn to before me on January 22, 1991.

My commission expires: February 6, 1992.




Glenda R. Tiffin, Notary Public

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/>

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

Sam Brownback, Governor

April 14, 2014

Marge Schulte
Farmer, John O., Inc.
370 W WICHITA AVE
PO BOX 352
RUSSELL, KS 67665-2635

Re: Plugging Application
API 15-167-22955-00-00
Krug C 7
SE/4 Sec.04-14S-14W
Russell County, Kansas

Dear Marge Schulte:

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 October 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 4

(785) 625-0550