



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

CORRECTED

RECEIVED

AUG 18 2003

Form C-1

December 2002

Form must be Typed

Form must be Signed

All blanks must be Filled

For KCC Use: Effective Date: 8-25-03 District # 3 SGA? Yes No

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION NOTICE OF INTENT TO DRILL

Must be approved by KCC five (5) days prior to commencing well

Expected Spud Date August 20, 2003 month day year

OPERATOR: License# 33284 Name: Larry Hall Address: 10520 Massey Road City/State/Zip: Mound City, Ks 66056 Contact Person: Larry Hall Phone: 913-259-1175 or 913-795-2700

CONTRACTOR: License# 33030 Marvin T. Kimzey dba Name: Kimzey Drilling

Well Drilled For: Oil Gas OMWD Seismic; # of Holes Other Well Class: Enh Rec Storage Disposal Other Type Equipment: Mud Rotary Air Rotary Cable Infield Pool Ext Wildcat

If OWWO: old well information as follows: Operator: Well Name: Original Completion Date: Original Total Depth:

Directional, Deviated or Horizontal wellbore? Yes No

If Yes, true vertical depth: Bottom Hole Location: KCC DKT #:

AP 120'S 100E Spot E/2 E/2 Sec 35 Twp. 21 S. R 23 East West 2620 2520 feet from N / S Line of Section 560 feet from E / W Line of Section Is SECTION X Regular Irregular?

(Note: Locals well on the Section Plat on reverse side) County: Linn Lease Name: Hall Well #: 2 Field Name: unknown CRITZER Is this a Prorated / Spaced Field? Yes No Target Information(s): Squirrel Nearest Lease or unit boundary: 900' (See ATT) Ground Surface Elevation: 940' feet MSL Water well within one-quarter mile: Yes No Public water supply well within one mile: Yes No Depth to bottom of fresh water: 80' + Depth to bottom of usable water: 130' + Surface Pipe by Alternate: 1 2 Length of Surface Pipe Planned to be set: 20' Length of Conductor Pipe required: None Projected Total Depth: 600' Formation at Total Depth: Squirrel Water Source for Drilling Operations: Well Farm Pond Other X DWR Permit #:

(Note: Apply for Permit with DWR) Will Cores be taken? Yes No If Yes, proposed zone:

* 240 ACRES - UNIT DESCRIPTION ATT

AFFIDAVIT

* WELL LOC. MOVED 100' South

* WAS 2620 FSL IS 2520 FSL 120'S/100'E OF E/2E/2

The undersigned hereby affirms that the drilling, completion and eventual plugging of this well will comply with K.S.A. 55 et. seq. It is agreed that the following minimum requirements will be met:

- 1. Notify the appropriate district office prior to spudding of well;
2. A copy of the approved notice of intent to drill shall be posted on each drilling rig;
3. The minimum amount of surface pipe as specified below shall be set by circulating cement to the top; in all cases surface pipe shall be set through all unconsolidated materials plus a minimum of 20 feet into the underlying formation.
4. If the well is dry hole, an agreement between the operator and the district office on plug length and placement is necessary prior to plugging;
5. The appropriate district office will be notified before well is either plugged or production casing is cemented in;
6. If an ALTERNATE # COMPLETION, production pipe shall be cemented from below any usable water to surface within 120 days of spud date. Or pursuant to Appendix "B" - Eastern Kansas surface casing order #133,891-C, which applies to the KCC District 3 area, alternate # cementing must be completed within 30 days of the spud date or the well shall be plugged. In all cases, NOTIFY district office prior to any cementing.

I hereby certify that the statements made herein are true and to the best of my knowledge and belief.

Date: 8-13-03 Signature of Operator or Agent: Larry L. Hall Title: operator

For KCC Use ONLY API # 15 - 107-23760-00-00 Conductor pipe required NONE feet Minimum surface pipe required 20 feet per Alt. + (2) Approved by: RJP 8-20-03 / RJP 8-28-03 This authorization expires: 2-20-04 (This authorization void if drilling not started within 6 months of effective date.) Spud date: Agent:

Remember to: - File Drill Pit Application (form CDP-1) with Intent to Drill; - File Completion Form ACO-1 within 120 days of spud date; - File acreage attribution plat according to field proration orders; - Notify appropriate district office 48 hours prior to workover or re-entry; - Submit plugging report (CP-4) after plugging is completed; - Obtain written approval before disposing or injecting salt water. - If this permit has expired (See: authorized expiration date) please check the box below and return to the address below. [] Well Not Drilled - Permit Expired Signature of Operator or Agent: Date:

25 21 23E

Mailed 10-21-03

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 33284
Name: Larry Hall
Address: 10520 Massey Road
City/State/Zip: Mound City, Kansas
Purchaser: Plains Mktg.
Operator Contact Person: Larry Hall
Phone: (913) 795-2700
Contractor Name: Marvin T. Kimzey
License: 33030
Geologist: None
Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SIOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)
Workover/Re-entry: Old Well Info as follows:
Operator: _____
Well Name: _____
Original Comp. Date: _____ Original Total Depth: _____
 Deepening Re-perf. Conv. to Entr./SWD
 Plug Back Plug Back Total Depth
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Entr.?) Docket No. _____
9-8-03 9-8-03 9-8-03
Start Date or Completion Date Date Reached TD Completion Date or Recompletion Date

API No. 15 - 107-23760-00-00
County: Linn
W 12 - E 12 = E 12 Sec. 35 Twp. 21 S. R. 23 East West
2520 feet from (S) N (circle one) Line of Section
560 feet from (E) W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE (SE) NW SW
Lease Name: Hall Well #: 2
Field Name: Critzer
Producing Formation: Bartlesville
Elevation: Ground: 940 Kelly Bushing: _____
Total Depth: 647 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 20 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from _____
feet depth to _____ w/ _____ sz cmt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
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 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 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.

I certify that the 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: Larry L. Hall
Title: _____ Date: 10-27-03
scribed and sworn to before me this 27 day of October, 2003
Notary Public: Sharon J. Carbon
Commission Expires: June 6, 2005

SHARON J. CARBON
Notary Public - State of Kansas
My Appt. Expires 6-6-05

KCC Office Use ONLY

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

Operator Name: Larry Hall Lease Name: Hall Well #: 2
 Sec. 35 Twp. 21 S. R. 23 East West County: Linn

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 <i>(Attach Additional Sheets)</i> | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | <input type="checkbox"/> Log Formation (Top), Depth and Datum | <input type="checkbox"/> Sample |
| Samples Sent to Geological Survey | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Name | Top Datum |
| Cores Taken | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | <u>Bartlesville</u> | <u>610</u> <u>620</u> |
| Electric Log Run <i>(Submit Copy)</i> | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | |
| at All E. Logs Run: | | | |

| CASING RECORD <input 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 | 10 1/2" | 7" | | 20' | Portland | 4 | |
| Production | 5 1/2" | 2 7/8" | | 644' | Cement | ticket attached | |

| 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 Plug Set/Type Specify Footage of Each Interval Perforated | Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used) | Depth |
|----------------|--|---|-------|
| 2 | 610' to 620' | see attached frac field ticket | |

| | | | | |
|--|--|-------------------|-------------|---|
| LOGGING RECORD | Size <u>1"</u> | Set At <u>630</u> | Packer At | Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| Date of First Reservoir Production, BWD or Entr. | Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Specify) | | | |
| Estimated Production Per 24 Hours | Oil Bbls. | Gas Mcf | Water Bbls. | Gas-Oil Ratio Gravity |

| | | |
|--|---|----------------------------|
| Position of Gas | METHOD OF COMPLETION | Production Interval |
| Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <input type="checkbox"/> | <input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Part. <input type="checkbox"/> Duality Comp. <input type="checkbox"/> Commingled | |
| <i>(If vented, Submit ACO-18.)</i> | <input type="checkbox"/> Other (Specify) | |

Kimzey Drilling Co.

License #33030

Start Date: 09/02/03
End Date: 09/08/03

Marvin Kimzey
P.O. Box 131
La Cygne, KS 66040

Larry Hall
10520 Massey Road
Mound City Kansas 66056
Hall #2 API#15-107-23760-00-00

| <u>Thickness of Strata</u> | <u>Strata Formation</u> | <u>Total Depth</u> |
|----------------------------|-------------------------|--------------------|
| 2 | soil | 2 |
| 13 | lime | 15 |
| 4 | coal | 19 |
| 19 | lime | 38 |
| 6 | shale | 44 |
| 4 | lime | 48 |
| 4 | shale | 52 |
| 17 | lime | 69 |
| 145 | shale | 214 |
| 10 | lime | 224 |
| 22 | shale | 246 |
| 13 | lime | 259 |
| 56 | shale | 315 |
| 17 | lime | 332 |
| 11 | shale | 343 |
| 4 | lime | 347 |
| 34 | shale | 381 |
| 21 | lime | 402 |
| 7 | coal | 409 |
| 4 | lime | 413 |
| 18 | shale | 431 |
| 11 | sand | 442 |
| 5 | shale sandy | 447 |
| 27 | shale | 474 |
| 2 | lime | 476 |
| 40 | shale | 516 |
| 2 | lime | 518 |
| 12 | shale | 530 |
| 3 | lime | 533 |
| 32 | shale | 565 |
| 3 | lime | 568 |
| 9 | shale | 577 |
| 5 | sand | 582 |
| 25 | shale | 607 |
| 3 | broken sand oil show | 610 - Top |
| 10 | oil sand | 620 - Bottom |
| 13 | shale | 643 |
| 4 | sand | 647T.D. |

Drilled 10 1/4ft. hole 20' set 20' of 7" surface w/4 sacks of cement.
Drilled 5 5/8 hole to 647' and ran 644' of 27/8 pipe. Core from 430' to 446'.

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
Jay Scott Emler, Commissioner
Pat Apple, Commissioner

Sam Brownback, Governor

April 25, 2014

Larry Hall
Hall, Larry
10520 MASSEY RD
MOUND CITY, KS 66056-9104

Re: Plugging Application
API 15-107-23760-00-00
HALL 2
SE/4 Sec.35-21S-23E
Linn County, Kansas

Dear Larry Hall:

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 22, 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