



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 1160186  
OIL & GAS CONSERVATION DIVISION

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 #: 31847  
Name: Bradley Oil Company  
Address 1: PO BOX 21614  
Address 2: \_\_\_\_\_  
City: OKLAHOMA CITY State: OK Zip: 73156 + 1614  
Contact Person: Bradd Schwartz  
Phone: (405) 823-8136

API No. 15 - 15-091-21914-00-00  
If pre 1967, supply original completion date: \_\_\_\_\_  
Spot Description: \_\_\_\_\_  
NE SE SE NW Sec. 28 Twp. 14 S. R. 22  East  West  
3262 Feet from  North /  South Line of Section  
2801 Feet from  East /  West Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
 NE  NW  SE  SW  
County: Johnson  
Lease Name: HICKS Well #: 9

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: 6.25 Set at: 20 Cemented with: 6 Sacks  
Production Casing Size: 2.875 Set at: 900 Cemented with: 109 Sacks

List (ALL) Perforations and Bridge Plug Sets:

**Attached**

Elevation: 1025 ( G.L. /  K.B.) T.D.: 900 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):

**Consolidated will fill hole with cement from top to bottom**

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: Bradd Schwartz  
Address: PO Box 21614 City: Oklahoma City State: OK Zip: 73156 + \_\_\_\_\_  
Phone: (405) 823-8136  
Plugging Contractor License #: 33961 Name: Consolidated Oil Well Services LLC  
Address 1: 1322 S GRANT Address 2: PO BOX 884  
City: CHANUTE State: KS Zip: 66720 + \_\_\_\_\_  
Phone: (620) 431-9210  
Proposed Date of Plugging (if known): 10/25/2013

Payment of the Plugging Fee (K.A.R. 82-3-118) will be guaranteed by Operator or Agent

**Submitted Electronically**

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202



**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 # 31847  
 Name: Bradley Oil Company  
 Address 1: PO BOX 21614  
 Address 2: \_\_\_\_\_  
 City: OKLAHOMA CITY State: OK Zip: 73156 + 1614  
 Contact Person: Bradd Schwartz  
 Phone: (405) 823 Fax: ( \_\_\_\_\_ ) \_\_\_\_\_  
 Email Address: bschwartz123@aol.com

Well Location:  
NE SE SE NW Sec. 28 Twp. 14 S. R. 22  East  West  
 County: Johnson  
 Lease Name: HICKS Well #: 9

*If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:*

**Surface Owner Information:**

Name: Ben Hicks  
 Address 1: PO Box 928  
 Address 2: \_\_\_\_\_  
 City: West Plains State: MO Zip: 65775 + \_\_\_\_\_

*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.

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I Submitted Electronically

Form	CP1 - Well Plugging Application
Operator	Bradley Oil Company
Well Name	HICKS 9
Doc ID	1160186

Perforations And Bridge Plug Sets

Perforation Top	Perforation Base	Formation	Bridge Plug Depth
882	886	Bartlesville	

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/>

Mark Sievers, Chairman  
Thomas E. Wright, Commissioner  
Shari Feist Albrecht, Commissioner

Sam Brownback, Governor

September 27, 2013

Bradd Schwartz  
Bradley Oil Company  
PO BOX 21614  
OKLAHOMA CITY, OK 73156-1614

Re: Plugging Application  
API 15-091-21914-00-00  
HICKS 9  
NW/4 Sec.28-14S-22E  
Johnson County, Kansas

Dear Bradd Schwartz:

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 March 26, 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

CARD MUST BE TYPED

State of Kansas

CARD MUST BE SIGNED

NOTICE OF INTENTION TO DRILL

(see rules on reverse side)

Expected Spud Date: 11 month 10 day 1987 year

API Number 15-091-21,914

OPERATOR: License # 5095

SE. NE. NW. Sec. 28 Twp. 14 S. Rg. 22 X East

Name: GERALD E. WILLIAMS

4100 Ft. from South Line of Section

Address: P. O. BOX 25830

2895 Ft. from East Line of Section

City/State/Zip: Overland Park, Ks, 66225

(Note: Locate well on Section Plat on reverse side)

Contact Person: Susie Glaze

Nearest lease or unit boundary line 165 feet

Phone: (913) 764-2625

County: JOHNSON

CONTRACTOR: License # 5885

Lease Name: HICKS Well # 9

Name: Alva G. Glaze Drig. Co.

Ground surface elevation feet MSL

City/State: Olathe, Kansas 66061

Domestic well within 330 feet: yes X no

Well Drilled For: Well Class: Type Equipment:

Municipal well within one mile: yes X no

X Oil Storage Infield Mud Rotary

Depth to bottom of fresh water 0

Gas Inj Pool Ext X Air Rotary

Depth to bottom of usable water 300

OWWO Expl Wildcat Cable

Surface pipe by Alternate: 1 2 X

If OWWO: old well info as follows:

Surface pipe planned to be set 20

Operator

Conductor pipe required None

Well Name

Projected Total Depth 900 feet

Comp Date Old Total Depth

Formation Bartlesville

I certify that well will comply with K.S.A. 55-101, et seq., plus eventually plugging hole to KCC specifications. Date 11-5-87 Signature of Operator or Agent [Signature] Title Agent

For KCC Use: Conductor Pipe Required feet; Minimum Surface Pipe Required 20 feet per Alt. X 2

This Authorization Expires 5-5-88 Approved By [Signature] 11-5-87

EFFECTIVE DATE: 11-10-87

July 03, 2014

Bradd Schwartz  
Bradley Oil Company  
PO BOX 21614  
OKLAHOMA CITY, OK 73156-1614

Re: Plugging Application  
API 15-091-21914-00-00  
HICKS 9  
NW/4 Sec.28-14S-22E  
Johnson County, Kansas

Dear Bradd Schwartz:

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 December 30, 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