

Kansas Corporation Commission Oil & Gas Conservation Division

1216173

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. 1	5			
Name:		If pre 196	If pre 1967, supply original completion date:			
Address 1:		Spot Des	cription:			
Address 2:			Sec Twp S. R East West			
City: State: Zip: + Contact Person:			Feet from North / South Line of Section Feet from East / West Line of Section			
Filone. ()				SE SW		
			ame:			
		Loade No		vvoii ir.		
Check One: Oil Well Gas Well OG	D&A Cat	thodic Wate	r Supply Well Ot	ther:		
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	
Elevation: (G.L. / K.B.) T.D.: Condition of Well: Good Poor Junk in Hole Proposed Method of Plugging (attach a separate page if addit Is Well Log attached to this application? Yes No	Casing Leak at:tional space is needed):			tone Corral Formation)		
Plugging of this Well will be done in accordance with K. Company Representative authorized to supervise plugging						
Address:	(City:	State:	Zip:	_+	
Phone: ()						
Plugging Contractor License #:		Name:				
Address 1:	A	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



Kansas Corporation Commission Oil & Gas Conservation Division

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) T-1 (Transfer) CP-1 (Plugging Application)		
OPERATOR: License #	_ Well Location:		
Name:			
Address 1:			
Address 2:			
City: State: Zip:+	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 additiona		
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:	accepts and in the real estate preparts toy records of the accepts traceurer		
City: State: Zip:+	_		
are preliminary non-binding estimates. The locations may be entered Select one of the following: I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be CP-1 that I am filing in connection with this form; 2) if the form	ank batteries, pipelines, and electrical lines. The locations shown on the plated on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. Be Act (House Bill 2032), I have provided the following to the surface the located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form mobeing 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.		
KCC will be required to send this information to the surface	I acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this less of the surface owner by filling out the top section of this form and the 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 C	ing fee with this form. If the fee is not received with this form, the KSONA-1 P-1 will be returned.		
Submitted Electronically			
I			

Form	CP1 - Well Plugging Application	
Operator	Rama Operating Co., Inc.	
Well Name	MCNICKLE 1	
Doc ID	1216173	

Perforations And Bridge Plug Sets

Perforation Top	Perforation Base	Formation	Bridge Plug Depth
3726	3820	Lansing & Misner	3850

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 Jay Scott Emler, Commissioner Pat Apple, Commissioner

July 28, 2014

Robin L. Austin Rama Operating Co., Inc. 101 S MAIN ST STAFFORD, KS 67578-1429

Re: Plugging Application API 15-185-21951-00-00 MCNICKLE 1 SE/4 Sec.23-24S-11W Stafford County, Kansas

Dear Robin L. Austin:

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 January 24, 2015. 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 1

(620) 225-8888