

### Kansas Corporation Commission Oil & Gas Conservation Division

1216622

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 1967, supply original completion date:  Spot Description:									
							Phone: ( )		Footages	Calculated from Neares		er:
							Filone. ( )		0		SE SW	
										me:		
									Lease Na		vveπ π	
Check One: Oil Well Gas Well OG	D&A Cat	hodic Water	Supply Well Ot	her:								
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 adding  Is Well Log attached to this application? Yes No. 1f ACO-1 not filed, explain why:	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:	(	Dity:	State:	Zip:	-+							
Phone: ( )												
Plugging Contractor License #:	1	Name:										
Address 1:	A	ddress 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:	SecTwpS. R East West				
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				
Contact Person:	the lease below:				
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:	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, tar are preliminary non-binding estimates. The locations may be entered a 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 form; and 3) my operator name, address, phone number, fax,  I have not provided this information to the surface owner(s). I KCC will be required to send this information to the surface of task, I acknowledge that I must provide the name and address that I am being charged a \$30.00 handling fee, payable to the	acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this is of the surface owner by filling out the top section of this form and KCC, which is enclosed 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 CF  Submitted Electronically	- I wiii be returnea.				
T.					

Form	CP1 - Well Plugging Application	
Operator	Mai Oil Operations, Inc.	
Well Name	KOESTER 1	
Doc ID	1216622	

## Perforations And Bridge Plug Sets

Perforation Top	Perforation Base	Formation	Bridge Plug Depth
3219	3406	Lansing-Kansas City	

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

August 04, 2014

Allen Bangert Mai Oil Operations, Inc. 8411 PRESTON RD STE 800 DALLAS, TX 75225-5520

Re: Plugging Application API 15-167-23414-00-00 KOESTER 1 NE/4 Sec.36-11S-15W Russell County, Kansas

### Dear Allen Bangert:

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 31, 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 4

(785) 625-0550