



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	Vincent Oil Corporation
Well Name	THOMPSON 2-20
Doc ID	1218222

Perforations And Bridge Plug Sets

Perforation Top	Perforation Base	Formation	Bridge Plug Depth
4694	4714	Mississippian	

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form KSONA-1  
July 2010  
Form Must Be Typed  
Form must be Signed  
All blanks must be Filled

**CERTIFICATION OF COMPLIANCE WITH THE  
KANSAS SURFACE OWNER NOTIFICATION ACT**

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Select the corresponding form being filed:  C-1 (Intent)  CB-1 (Cathodic Protection Borehole Intent)  T-1 (Transfer)  CP-1 (Plugging Application)

OPERATOR: License # 5004  
Name: Vincent Oil Corporation  
Address 1: 155 N. Market , Ste 700  
Address 2: \_\_\_\_\_  
City: Wichita State: Kansas Zip: 67202 + 1821  
Contact Person: M.L. Korphage  
Phone: ( 316 ) 262-3573 Fax: ( 316 ) 262-3309  
Email Address: land@vincentoil.com

Well Location:  
SW SW SE NW Sec. 20 Twp. 29 S. R. 15  East  West  
County: Pratt  
Lease Name: Thompson Well #: 2-20

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

**Surface Owner Information:**

Name: Mr. Dwight H. Thompson  
Address 1: 8406 Tamarac  
Address 2: \_\_\_\_\_  
City: Wichita State: KS. Zip: 67206 + \_\_\_\_\_

*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.*

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

Date: 8/11/2014 Signature of Operator or Agent: M.L. Korphage Title: Geologist

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 # 5004  
 Name: Vincent Oil Corporation  
 Address: 155 N. Market, Suite 700  
 City/State/Zip: Wichita, Kansas 67202  
 Purchaser: SemCrude LP  
 Operator Contact Person: Rick Hiebsch  
 Phone: (316) 262-3573  
 Contractor: Name: Pickrell Drilling Co., Inc.  
 License: 5123  
 Wellsite Geologist: Tom Funk  
 Designate Type of Completion:  
 New Well  Re-Entry  Workover  
 Oil  SWD  SLOW  Temp. Abd.  
 Gas  ENHR  SIGW  
 Dry  Other (Core, WSW, Expl., Cathodic, etc)  
 If Workover/Re-entry: Old Well Info as follows:  
 Operator: \_\_\_\_\_  
 Well Name: \_\_\_\_\_  
 Original Comp. Date: \_\_\_\_\_ Original Total Depth: \_\_\_\_\_  
 Deepening  Re-perf.  Conv. to Enhr./SWD  
 Plug Back \_\_\_\_\_ Plug Back Total Depth \_\_\_\_\_  
 Commingled \_\_\_\_\_ Docket No. \_\_\_\_\_  
 Dual Completion \_\_\_\_\_ Docket No. \_\_\_\_\_  
 Other (SWD or Enhr.?) \_\_\_\_\_ Docket No. \_\_\_\_\_  

9-29-07	10-08-07	1-22-08
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

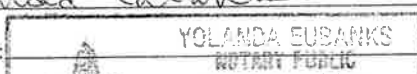
API No. 15-151-22283-0000  
 County: Pratt  
100' N W/2 Sec. 20 Twp. 29 S. R. 15  East  West  
2540 feet from S N (circle one) Line of Section  
1320 feet from E W (circle one) Line of Section  
 Footages Calculated from Nearest Outside Section Corner:  
 (circle one) NE SE NW SW  
 Lease Name: Thompson Well #: 2-20  
 Field Name: wildcat  
 Producing Formation: Mississippian  
 Elevation: Ground: 2032 Kelly Bushing: 2037  
 Total Depth: 4912 Plug Back Total Depth: \_\_\_\_\_  
 Amount of Surface Pipe Set and Cemented at 412 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/ \_\_\_\_\_ sx cmt.

**Drilling Fluid Management Plan**  
 (Data must be collected from the Reserve Pit)  
 Chloride content 19,000 ppm Fluid volume 1000 bbls  
 Dewatering method used removed free fluids and allow to dry  
 Location of fluid disposal if hauled offsite: \_\_\_\_\_  
 Operator Name: Oil Producer, Inc. of Kansas  
 Lease Name: Watson #2 SWD License No.: 8061  
 Quarter SW Sec. 8 Twp. 29 S. R. 15  East  West  
 County: Pratt Docket No.: D-24238

**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 of 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.

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: Richard H. Hiebsch  
 Title: President Date: February 25, 2008  
 Subscribed and sworn to before me this 25th day of February,  
 20 08.  
 Notary Public: Yolanda Eubanks  
 Date Commission Expires: \_\_\_\_\_



**KCC Office Use ONLY**

Letter of Confidentiality Received  
 If Denied, Yes  Date: \_\_\_\_\_  
 Wireline Log Received  
 Geologist Report Received  
 UIC Distribution

Operator Name: Vincent Oil Corporation Lease Name: Thompson Well #: 2-20  
 Sec. 20 Twp. 29 S. R. 15  East  West County: Pratt

**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  Yes  No  
 (Attach Additional Sheets)  
 Samples Sent to Geological Survey  Yes  No  
 Cores Taken  Yes  No  
 Electric Log Run  Yes  No  
 (Submit Copy)

Log Formation (Top), Depth and Datum  Sample  
 Name Top Datum  
 See attached sheets

List All E. Logs Run:

Dual Induction, Compensated Density/Neutron,  
 Sonic, Micro

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
Surface	12 1/4 in.	8 5/8	23	412 ft.	60-40 Poz	400	2% gel, 3% cc
Production	7 7/8 in.	5 1/2	14	4900 ft.	ASC	185	5# Kol-seal/sx

ADDITIONAL CEMENTING / SQUEEZE RECORD

Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate				
<input type="checkbox"/> Protect Casing				
<input type="checkbox"/> Plug Back TD				
<input type="checkbox"/> Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
2	4694 to 4714 ft.	2000 gals. 15% MCA, Frac with 104,000# sand and	perfs
		5714 bbls. of slick water	

TUBING RECORD Size 2 7/8 in. Set At 4750 ft. Packer At \_\_\_\_\_ Liner Run  Yes  No

Date of First, Resumerd Production, SWD or Enhr. 2-21-08 Producing Method  Flowing  Pumping  Gas Lift  Other (Explain)

Estimated Production Per 24 Hours Oil 25 Bbls. Gas 0 Mcf Water 100 Bbls. Gas-Oil Ratio \_\_\_\_\_ Gravity 38

Disposition of Gas \_\_\_\_\_ METHOD OF COMPLETION \_\_\_\_\_ Production Interval \_\_\_\_\_  
 Vented  Sold  Used on Lease  Open Hole  Perf.  Dually Comp.  Commingled \_\_\_\_\_  
 (If vented, Submit ACO-18.)  Other (Specify) \_\_\_\_\_

Vincent Oil Corporation  
Thompson #2-20 (API # 15-151-22283-00-00)  
2540' FNL & 1320' FWL  
20 --29S – 15W  
Pratt Co., Kansas

**Elevation:** 2032 GL & 2037 KB

**Casing / Cementing Information:**

Surface Casing: 8 5/8" @ 412' cemented with 400 sx 60 / 40 POZ (2% Gel & 3% CC) \*

\*(Cement did circulate to the cellar)

Production Casing: 5 1/2" @ 4900' cemented with 185 sx ASC (5# Kol-seal/sx) \*\*

\*\* (Top of cement by Bond Log at 3270')

**Formation Tops:**

Stone Corral Anhydrite	924 (+1113)
Heebner Shale	3878 (-1941)
Brown Limestone	4150 (-2113)
Lansing	4164 (-2127)
Mississippian	4692 (-2655)
Viola	4890 (-2853)
RTD	4912 (-2875)

**Production Perforations:** 4694' to 4714' (2 SPF)

FEB 26 2008

CONSERVATION DIVISION  
PLUGS

# ALLIED CEMENTING CO., INC. 24265

Federal Tax I.D. \_\_\_\_\_

REMIT TO P.O. BOX 31  
RUSSELL, KANSAS 67665

SERVICE POINT:  
MEDICINE LODGE

DATE <u>9-29-07</u>	SEC <u>20</u>	TWP <u>29S</u>	RANGE <u>15W</u>	CALLED OUT <u>9:30 AM</u>	ON LOCATION <u>10:45 AM</u>	JOB START <u>2:15 PM</u>	JOB FINISH <u>2:45 PM</u>
LEASE <u>THOMPSON</u>		WELL # <u>2-20</u>		LOCATION <u>CROFT, KS, 1/4 NORTH</u>		COUNTY <u>PRATT</u>	STATE <u>KANSAS</u>
OLD OR <u>NEW</u> (Circle one)				EAST INTO			

CONTRACTOR BECKRELL #

TYPE OF JOB SURFACE CASING

HOLE SIZE 12 1/4" T.D. 417'

CASING SIZE 8 5/8" 24# DEPTH 417'

TUBING SIZE \_\_\_\_\_ DEPTH \_\_\_\_\_

DRILL PIPE \_\_\_\_\_ DEPTH \_\_\_\_\_

TOOL \_\_\_\_\_ DEPTH \_\_\_\_\_

PRES. MAX. 350# MINIMUM \_\_\_\_\_

MEAS. LINE \_\_\_\_\_ SHOE JOINT 40.58'

CEMENT LEFT IN CSG. \_\_\_\_\_

PERFS. \_\_\_\_\_

DISPLACEMENT 2 1/2 BBLs FRESH WATER

EQUIPMENT \_\_\_\_\_

PUMP TRUCK CEMENTER KEVIN B.

# 360-265 HELPER CARL B.

BULK TRUCK \_\_\_\_\_

# 353-250 DRIVER COLE H.

BULK TRUCK \_\_\_\_\_

# \_\_\_\_\_ DRIVER \_\_\_\_\_

OWNER VINCENT OIL COMPANY

CEMENT AMOUNT ORDERED 400# 60:40:2 + 3% CP

COMMON A	<u>240</u>	@ <u>11.10</u>	<u>2664.00</u>
POZMIX	<u>160</u>	@ <u>6.20</u>	<u>992.00</u>
GEL	<u>7</u>	@ <u>16.45</u>	<u>116.55</u>
CHLORIDE	<u>1.3</u>	@ <u>46.60</u>	<u>60.58</u>
ASC		@	
		@	
		@	
		@	
		@	
		@	
		@	
HANDLING	<u>420</u>	@ <u>1.90</u>	<u>798.00</u>
MILEAGE	<u>420 x 19</u>	@ <u>.09</u>	<u>718.20</u>
TOTAL			<u>5894.55</u>

REMARKS:

RUN 8 5/8" CSG. + BREAK CIRCULATION  
PUMP 5 BBLs FRESH WATER  
MAX 400# 60:40:2 + 3% CP  
DISPLACE AUG TO 377' / 2 1/2 BBLs  
WATER  
CEMENT AID CIRCULATE TO  
CELLAR!

CHARGE TO: VINCENT OIL Co

STREET \_\_\_\_\_

CITY WICHITA STATE KANSAS ZIP \_\_\_\_\_

SERVICE

DEPTH OF JOB 417'

PUMP TRUCK CHARGE 815.00

EXTRA FOOTAGE 117' @ .65 76.05

MILEAGE 19 @ 6.00 114.00

MANIFOLD \_\_\_\_\_ @ \_\_\_\_\_

HEAD RENTAL @ 100.00 100.00

TOTAL 1105.05

PLUG & FLOAT EQUIPMENT

<u>1- BAFFLE PLATE</u>	@ <u>135.00</u>	<u>135.00</u>
<u>1- 8 5/8" TRP</u>	@ <u>100.00</u>	<u>100.00</u>
	@	
	@	
	@	
ANY APPLICABLE TAX		
WILL BE CHARGED UPON INVOICING		TOTAL <u>235.00</u>

To Allied Cementing Co., Inc.  
You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

TAX \_\_\_\_\_

TOTAL CHARGE 1105.05

DISCOUNT \_\_\_\_\_ IF PAID IN 30 DAYS

SIGNATURE Mike Kern Mike Kern  
PRINTED NAME



# ALLIED CEMENTING CO., INC. FEB 16 2008 31276

Federal Tax I.D. \_\_\_\_\_

CONSERVATION DIVISION  
WICHITA, KS  
SERVICE POINT: medicine lodge

REMIT TO P.O. BOX 31  
RUSSELL, KANSAS 67665

DATE <u>10-8-07</u>	SEC. <u>20</u>	TWP. <u>29S</u>	RANGE <u>15W</u>	CALLED OUT <u>1:00p.m</u>	ON LOCATION <u>4:00p.m</u>	JOB START <u>9:00p.m</u>	JOB FINISH <u>10:00p.m</u>
LEASE <u>Thompson</u>		WELL # <u>220</u>	LOCATION <u>Croft, KS, 1/16 N E into</u>	COUNTY <u>Pratt</u>	STATE <u>KS</u>		
OLD OR NEW (Circle one) <u>NEW</u>							

CONTRACTOR <u>Pickrell #10</u>	OWNER <u>Uincent Oil Co.</u>
TYPE OF JOB <u>Production</u>	
HOLE SIZE <u>7 7/8</u> T.D. <u>4912</u>	CEMENT
CASING SIZE <u>5 1/2</u> DEPTH <u>4896</u>	AMOUNT ORDERED <u>2005 v ASC + 5 # Kol Seal</u>
TUBING SIZE _____ DEPTH _____	<u>+ 5 # fl-160</u>
DRILL PIPE _____ DEPTH _____	<del>3 # 12 gal - C1410</del>
TOOL _____ DEPTH _____	
PRES. MAX <u>1400</u> MINIMUM _____	COMMON <del>2</del> @ _____
MEAS. LINE _____ SHOE JOINT <u>20.65</u>	POZMIX @ _____
CEMENT LEFT IN CSG. _____	GEL @ _____
PERFS. _____	CHLORIDE @ _____
DISPLACEMENT <u>121 2 3/16 Kcl Ho</u>	ASC <u>200</u> @ <u>13.75</u> <u>2750.00</u>
EQUIPMENT	<u>Kol Seal 1000</u> @ <u>.70</u> <u>700.00</u>
	@ _____
PUMP TRUCK CEMENTER <u>Mark Cdey</u>	<u>Cl. Pao 12 gal.</u> @ <u>25.00</u> <u>3.00.00</u>
# <u>414-302</u> HELPER <u>Greg G</u>	<u>FL-160 94 #</u> @ <u>10.65</u> <u>1001.10</u>
BULK TRUCK	@ _____
# <u>381</u> DRIVER <u>Sc. F.</u>	@ _____
BULK TRUCK	@ _____
# _____ DRIVER _____	@ _____
	HANDLING <u>257</u> @ <u>1.90</u> <u>488.30</u>
	MILEAGE <u>19 x 257 x .09</u> <u>439.47</u>
	TOTAL <u>5678.8</u>

REMARKS:  
Pipe on bottom, Lorenke etc.  
plug bot hole w/ 155x  
Mix 1855x ASC + 5 # Kol Seal + 5 # fl-160  
Stop, wash pump lines, release plug  
Disp w/ 2 3/16 Kcl Ho, seal lift. slow  
rate @ 1/16 BBLs. Buge plug 500 over  
@ 1/21 BBLs, release float did not hold

CHARGE TO: Uincent Oil Co.  
 STREET \_\_\_\_\_  
 CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

SERVICE	
DEPTH OF JOB <u>4896</u>	
PUMP TRUCK CHARGE	<u>1750.00</u>
EXTRA FOOTAGE @	
MILEAGE <u>19</u> @ <u>6.00</u>	<u>114.00</u>
MANIFOLD <u>Head Rental</u> @ <u>100.00</u>	<u>100.00</u>
@ _____	
@ _____	
TOTAL	<u>1964.00</u>

5 1/2" PLUG & FLOAT EQUIPMENT

1-Rubber plug	@ <u>65.00</u>	<u>65.00</u>
1-Guide Shoe	@ <u>170.00</u>	<u>170.00</u>
6-Centrolars	@ <u>50.00</u>	<u>300.00</u>
1-AF Insert	@ <u>260.00</u>	<u>260.00</u>
@ _____		

ANY APPLICABLE TAX  
 WILL BE CHARGED TOTAL 795.00  
 UPON INVOICING

TAX \_\_\_\_\_  
 TOTAL CHARGE ~~\_\_\_\_\_~~  
 DISCOUNT ~~\_\_\_\_\_~~ IF PAID IN 30 DAYS

To Allied Cementing Co., Inc.  
 You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

SIGNATURE x Mike Kern

x Mike Kern  
 PRINTED NAME

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

August 13, 2014

M.L. Korphage  
Vincent Oil Corporation  
155 N MARKET STE 700  
WICHITA, KS 67202-1821

Re: Plugging Application  
API 15-151-22283-00-00  
THOMPSON 2-20  
NW/4 Sec.20-29S-15W  
Pratt County, Kansas

Dear M.L. Korphage:

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 February 09, 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