



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 # _____

Well Location:

Name: _____

____ - ____ - ____ Sec. ____ Twp. ____ S. R. ____ East West

Address 1: _____

County: _____

Address 2: _____

Lease Name: _____ Well #: _____

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 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.

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____ + _____

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	Zenergy, Inc.
Well Name	O BRIEN-BARBY 1-32
Doc ID	1222761

Perforations And Bridge Plug Sets

Perforation Top	Perforation Base	Formation	Bridge Plug Depth
6023	6043	Morrow	



Completed Wellbore Schematic

07/28/09 Chris Hill

01/21/10 Revised; 09/11/14 correct formation only

Well Type: Gas Well

Well Name: O'Brien-Barby # 1 - 32

Field Name: McKinney

County, ST: Meade, Ks

Location: Sec 32 - 34S - 26W

Formation: 660' FNL & 660' FWL

API Number: 15 - 119 - 20,595

Date: 12/14/82
Surface Casing **Jts:** 36
Size: 8 5/8" 24# J-55 **Set @** 1,445'
Cmt w/ 600sx Lite, & 200sx Class H
TOC: Surface

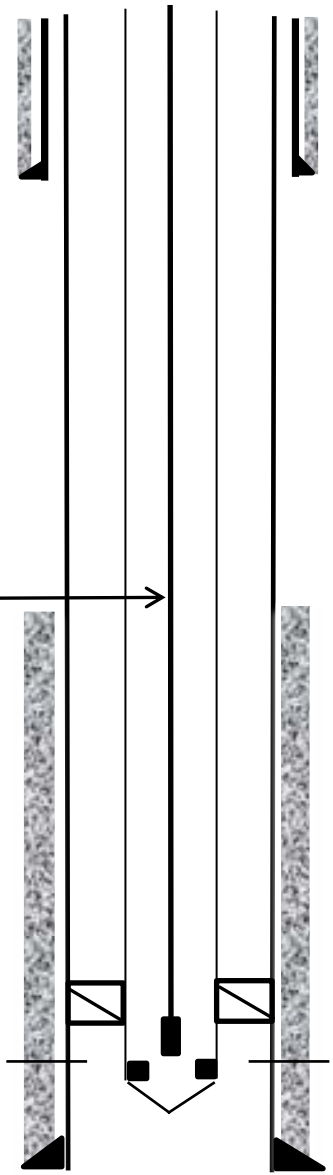
Date: 12/24/82
Production Casing **Jts:** 156
Size: 5 1/2" 15.5# K-55 **Set @** 6,225'
Cmt w/ 175sx 50/50 Pozmix
Est. TOC: 5,400'

Date: 01/21/10
Tubing **Jts:** 194
Size: 2 3/8" 4.7# **Set @** 6111'
 188 jts - 2 3/8" tbg, 2 3/8" x 5 1/2" TAC, 6 jts -
 2 3/8" tbg, seat nipple, 1 2 3/8" x 10' MA

(01/21/10)
 1 - 1 1/4" x 22' polish rod w/ 1 1/2" x 10' polish
 rod liner, 2 - 7/8" x 2' pony rod, 1 - 7/8" x 4'
 pony rod, 1 - 7/8" x 6' pony rod, 2 - 7/8" x 8'
 pony rods, 76 - 7/8" plain rods, 161 - 3/4" plain
 rods, 4 - 1 1/2" X 25' sinker bars,
 1 - 2" x 1 1/4" x 16' RWBC pump, and
 1" x 6' gas anchor.

(01/29/83) Morrow
 6,023' - 43' 4spf

GL: 2,318' **KB:** 14'



PBTD: 6,161' (02/08/83)
TD: 6,240' (12/23/82)

Well Information

Spud Date: 12/12/82

Open Hole Logs: 12/23/82, Platform Express

Well Head Info: N/A

1/21/10 Test tbg to 6000psig. Tag TD @ 6118'
 Change pumps.

Pressure History		
Date	BHP/SITP	SI Time

Zone	Stimulation
Chester	Frac w/ 12,000 gals Apollo 40 gel, 16,500# 20/40 sand
(10/31/83)	3bbls of oil/d, 10bbls of water/d, 220 MCF/d

Conservation Division
266 N. Main St., Ste. 220
Wichita, KS 67202-1513



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

September 11, 2014

Belinda M. Brock
Zenergy, Inc.
6100 S YALE STE 1700
TULSA, OK 74136-1921

Re: Plugging Application
API 15-119-20595-00-00
O BRIEN-BARBY 1-32
NW/4 Sec.32-34S-26W
Meade County, Kansas

Dear Belinda M. Brock:

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 10, 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

Summary of Changes

Lease Name and Number: O BRIEN-BARBY 1-32

API/Permit #: 15-119-20595-00-00

Doc ID: 1222761

Correction Number: 1

Field Name	Previous Value	New Value
Save Link	../../kcc/detail/operatorEditDetail.cfm?docID=1210172	../../kcc/detail/operatorEditDetail.cfm?docID=1222761

Summary of Attachments

Lease Name and Number: O BRIEN-BARBY 1-32

API: 15-119-20595-00-00

Doc ID: 1222761

Correction Number: 1

Attachment Name

O'Brien-Barby 1-32 Wellbore Schematic

Plugging Approval Letter