



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	Sirius Energy Corp.
Well Name	GRAY 9
Doc ID	1223602

Perforations And Bridge Plug Sets

Perforation Top	Perforation Base	Formation	Bridge Plug Depth
158	170		

AUG 24 1984

KANSAS DRILLERS LOG

API No. 15 — 133 — 20995
County Number

S. 34 T. 30S R. 21E ^E/_W

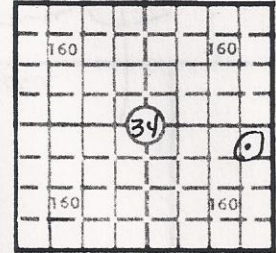
Loc. NE NE SE

Operator
Hickory Creek Oil Co.

County Neosho
 640 Acres
 N

Address
P.O. Box 379, Parsons, Ks. 67357

Well No. # 9 Lease Name D. D. Gray



Footage Location
2145 feet from ~~XX~~ (S) line 495 feet from (E) ~~XX~~ line

Locate well correctly
 Elev.: Gr. 842.38'

Principal Contractor L-K Drilling Co. Geologist

Spud Date 11/14/78 Total Depth 270 ft. P.B.T.D.

Date Completed Nov, 17, 1978 Oil Purchaser Eureka Crude Purchasing

DF _____ KB _____

CASING RECORD

Report of all strings set — surface, intermediate, production, etc.

Purpose of string	Size hole drilled	Size casing set (in O.D.)	Weight lbs/ft.	Setting depth	Type cement	Sacks	Type and percent additives
surface	9"	7"	20 lbs.	50 ft.	portland	four	none
production	6 1/4	OD 4 1/2	9 lbs.	266 ft.	Portland A	31	Gel (1 sk)

LINER RECORD

PERFORATION RECORD

Top, ft.	Bottom, ft.	Sacks cement	Shots per ft.	Size & type	Depth interval
			1	28 g	158 - 170

TUBING RECORD

Size	Setting depth	Packer set at

ACID, FRACTURE, SHOT, CEMENT SQUEEZE RECORD

Amount and kind of material used	Depth interval treated
Acid frac w/40 sks 12/30 sand & 10 sks 10/20 sand	158 - 170

INITIAL PRODUCTION

Date of first production		Producing method (flowing, pumping, gas lift, etc.)			
RATE OF PRODUCTION PER 24 HOURS	Oil bbls.	Gas MCF	Water bbls.	Gas-oil ratio CFPB	
Disposition of gas (vented, used on lease or sold)			Producing interval (s) Injection well		

INSTRUCTIONS: As provided in KCC Rule 82-2-125, within 90 days after completion of a well, one completed copy of this Drillers Log shall be transmitted to the State Geological Survey of Kansas, 4150 Monroe Street, Wichita, Kansas 67209. Copies of this form are available from the Conservation Division, State Corporation Commission, 3830 So. Meridian (P.O. Box 17027), Wichita, Kansas 66217. Phone AC 316-522-2206. If confidential custody is desired, please note Rule 82-2-125. Drillers Logs will be on open file in the Oil and Gas Division, State Geological Survey of Kansas, Lawrence, Kansas 66044.

Operator Hickory Creek Oil Co. DESIGNATE TYPE OF COMP.: OIL, GAS, DRY HOLE, SWDW, ETC.:

Well No. #9 Lease Name D. D. Gray Injection

S 34 T 30 R 21 ^E/_W NE, NE, SE

WELL LOG

Show all important zones of porosity and contents thereof; cored intervals, and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures, and recoveries.

SHOW GEOLOGICAL MARKERS, LOGS RUN, OR OTHER DESCRIPTIVE INFORMATION.

FORMATION DESCRIPTION, CONTENTS, ETC.	TOP	BOTTOM	NAME	DEPTH
Soil	0	2		
Clay	2	10		
Gravel	10	13		
Limestone	13	29		
Shale	29	35		
Limestone	35	47		
Shale	47	55		
Limestone	55	57		
Shale	57	133		
Coal	133	134		
Shale	134	145		
Limestone	145	148		
Shale	148	150		
Broken Limestone	150	154		
Sandy Shale	154	157		
Oil Sand	157	159		
Core #1	159	179		
Core # 2	179	199		
Oil Sand	199	222		
Sandy Shaley	222	234		
Sandy Shale	234	270		

USE ADDITIONAL SHEETS, IF NECESSARY, TO COMPLETE WELL RECORD.

Date Received _____

 Signature
 General Manager for INCO Energy Inc.
 Title
 August 24, 1984
 Date

CORNISH

WIRELINE SERVICES, INC.

Box 260

Chanute, Kansas

Phone 431-9308

RADIOACTIVITY LOG

FILING NO.

COMPANY MISSOURI LEAD & ZINC

WELL D. D. GRAY NO. 9

FIELD

COUNTY NEOSHO

STATE KANSAS

LOCATION: NE 1/4 NE 1/4 SE 1/4

SEC 34 TWP 30S RGE 21E

OTHER SERVICES:

PERMANENT DATUM: G.L. ELEV. 842.1'
 LOG MEASURED FROM: G.L. FT. ABOVE PERM. DATUM
 DRILLING MEASURED FROM: G.L. ELEV. 842.1'

ELEV. K.B. ,
 D.F. G.L. 842.1'

DATE	12-4-78	12-4-78	
RUN NO.	1 NW	1 NW	
TYPE LOG	GAMMA RAY	NEUTRON	
DEPTH-DRILLER			
DEPTH-LOGGER	263.6'	263.6'	
BOTTOM LOGGED INTERVAL	257.8'	262.6'	
TOP LOGGED INTERVAL	3'	8'	
TYPE FLUID IN HOLE	WATER	WATER	
SALINITY, PPM CL.			
DENSITY			
LEVEL	FULL	FULL	
MAX. REC. TEMP., DEG F.			
OPERATING RIG TIME			
RECORDED BY	CORNISH J. ELLISON J.	CORNISH J. ELLISON J.	
WITNESSED BY			

BORE-HOLE RECORD

NO. BIT FROM TO

SIZE 4 1/2"

CASING RECORD

WGT FROM TO

0

T.D.

FOLD HERE

THIS HEADING AND LOG CONFORMS TO API RP 33

EQUIPMENT DATA

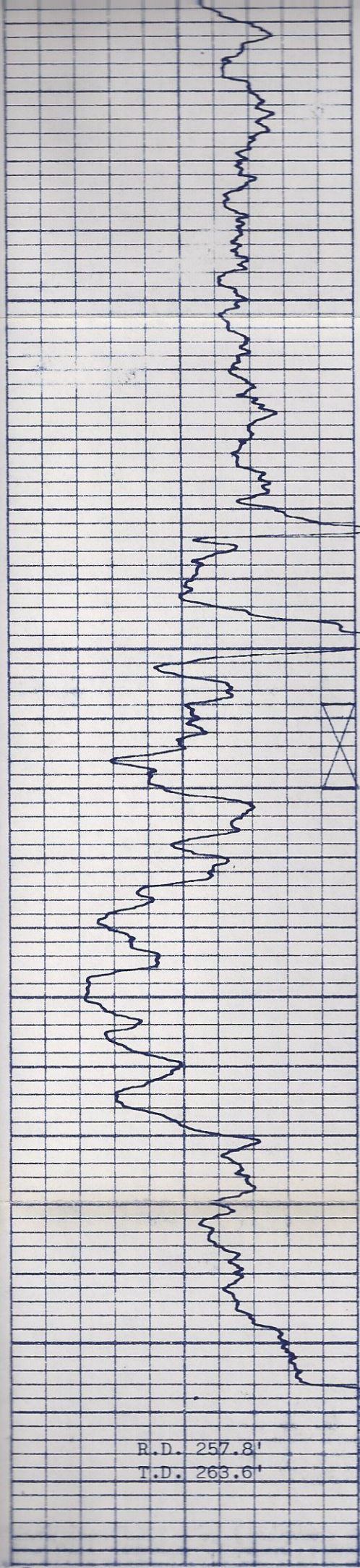
GAMMA RAY			NEUTRON		
RUN NO.	1 NW		RUN NO.	1 NW	
TOOL MODEL NO.	9205		LOG TYPE	NEU/NEU	
DIAMETER	1-11/16"		TOOL MODEL NO.	9205	
DETECTOR MODEL NO.	95SC		DIAMETER	1-11/16"	
TYPE	SCINT.		DETECTOR MODEL NO.	95HE	
LENGTH	1"x4"		TYPE	he	
DISTANCE TO N. SOURCE	8.5'		LENGTH	1"x6"	
			SOURCE MODEL NO.	AC	
			SERIAL NO.	MRC415	
			SPACING	13"	
			TYPE	Am/Be	
			STRENGTH	6.7x10 ⁶	

LOGGING DATA

RUN NO.	GENERAL		GAMMA RAY				NEUTRON				
	FROM	TO	SPEED FT./MIN.	T.C. SEC.	SENS. SETTINGS	ZERO DIV. L OR R	API G.R. UNITS PER LOG DIV.	T.C. SEC.	SENS. SETTINGS	ZERO DIV. L OR R	API N. UNITS PER LOG DIV.
1	262.6'	3'	25	2.5	10-.0	2L	20	2.0	0-.35	4L	

REFERENCE LITERATURE:

REMARKS DRILLING CONTRACTOR: Joy Spradling



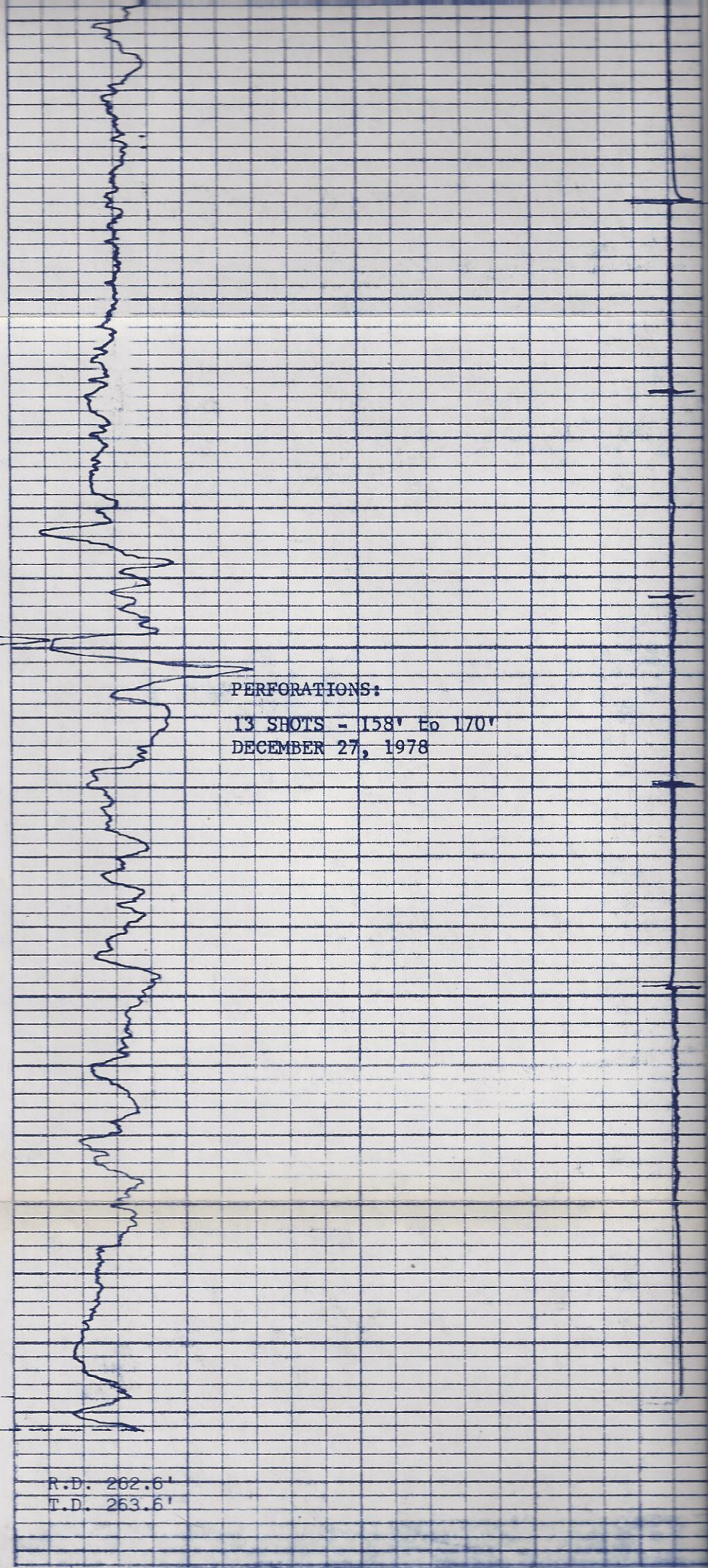
100

150

200

250

R.D. 257.8'
T.D. 263.6'



PERFORATIONS:

13 SHOTS - 158' To 170'
DECEMBER 27, 1978

R.D. 262.6'
T.D. 263.6'

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 18, 2014

Vernon Hermreck
Sirius Energy Corp.
526 COUNTRY PL, SOUTH
ABILENE, TX 79606-7032

Re: Plugging Application
API 15-133-20995-00-00
GRAY 9
SE/4 Sec.34-30S-21E
Neosho County, Kansas

Dear Vernon Hermreck:

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 17, 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 3

(620) 432-2300