

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1223657

	WELL PLUGGING APPLICATIO	٥N	l
1	Cartification of Compliance with the Kanage Surface	0	

March 2010 This Form must be Typed Form must be Signed All blanks must be Filled

Form CP-1

Form KSONA-1, Certification of Compliance with the Kansas Surface Owner Notification Act,
MUST be submitted with this form.

OPERATOR: License #:		API No. 1	15		
Name:		If pre 196	67, supply original cor	npletion date:	
Address 1:		Spot Des	scription:		
Address 2:			Sec	Twp S. R	East West
City: State:			Feet from	n 🗌 North / 🗌	South Line of Section
		-	Feet from	n 🗌 East /	West Line of Section
Contact Person:		Footages	s Calculated from Nea		n Corner:
Phone: ()		-		SESW	
		Lease Na	ame:	Well #	:
Check One: Oil Well Gas Well OG	D&A Catho	odic 🗌 Wate	r Supply Well	Other:	
SWD Permit #:				e Permit #:	
Conductor Casing Size:					Sacks
Surface Casing Size:			Cemented with:		
Production Casing Size:					
List (ALL) Perforations and Bridge Plug Sets:					00000
Condition of Well: Good Poor Junk in Hole Proposed Method of Plugging <i>(attach a separate page if addit</i> Is Well Log attached to this application? Yes No	ional space is needed):	(Interval)	_	(Stone Corral Formatio	(חי
If ACO-1 not filed, explain why:					
Plugging of this Well will be done in accordance with K.	S.A. 55-101 <u>et. seq</u> . and the R	Rules and Regula	ations of the State C	orporation Commi	ssion
Company Representative authorized to supervise plugging	operations:				
Address:	Cit	ty:	State:	Zip:	+
Phone: ()					
Plugging Contractor License #:	Na	ame:			
Address 1:	Ad	dress 2:			
City:			State:	Zip:	+
Phone: ()					
Proposed Date of Plugging (if known):					
Payment of the Plugging Fee (K.A.R. 82-3-118) will be gu	aranteed by Operator or Age	ent			

Submitted Electronically



KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

CERTIFICATION OF COMPLIANCE WITH THE KANSAS SURFACE OWNER NOTIFICATION ACT Form KSONA-1 January 2014 Form Must Be Typed Form must be Signed All blanks must be Filled

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:	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
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 additional
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: 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.

Submitted Electronically

I

Form	CP1 - Well Plugging Application
Operator	Pickrell Drilling Company, Inc.
Well Name	LEE F 1
Doc ID	1223657

Perforations And Bridge Plug Sets

Perforation Top	Perforation Base	Formation	Bridge Plug Depth
4512	4517	Chero	

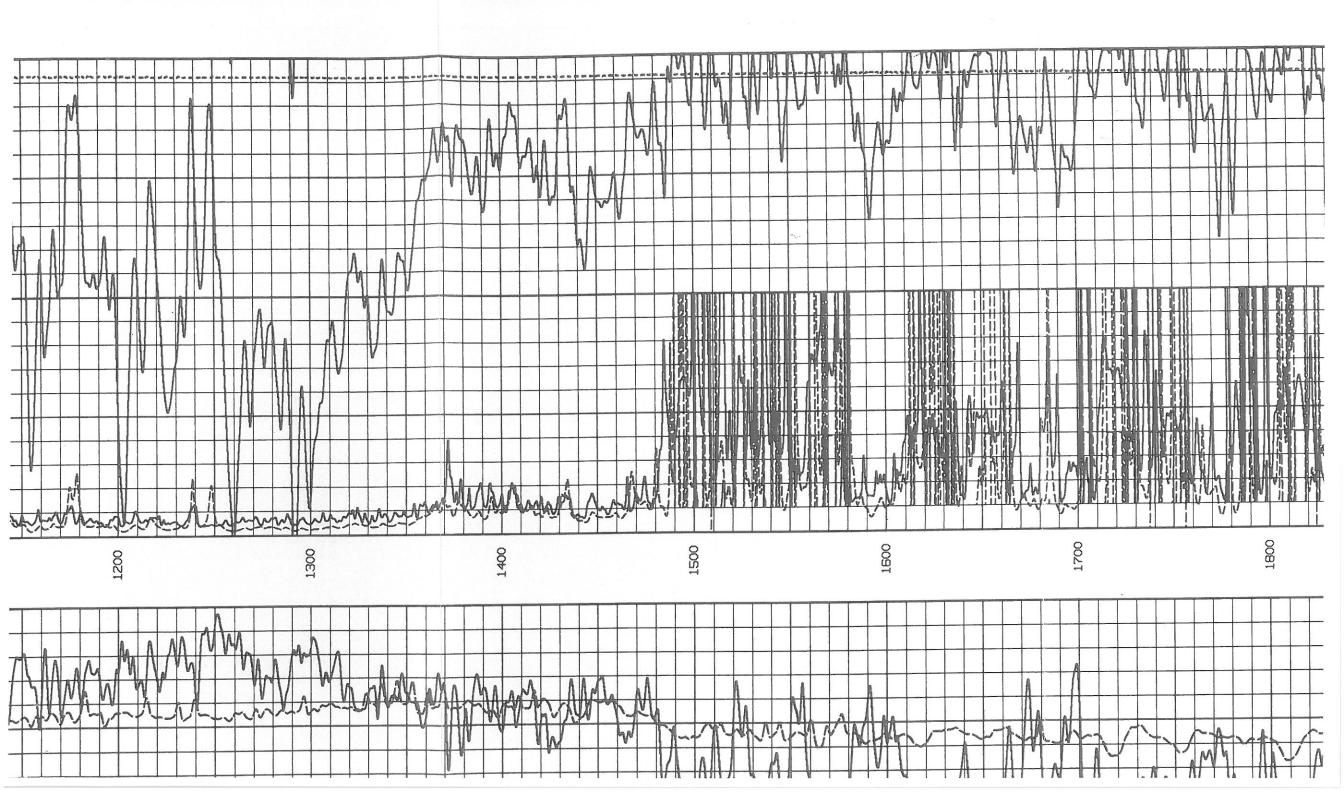
TS	DUAL INDUCTION LATEROLOG	Annumber OTHER SERVICES 010L 01HER SERVICES 010L 0.1 0.1 0.1
T DAS+ TE87.9	DUAL IN	ING COMPANY, INC. STATE KS. STATE KS. STATE KS. STATE KS. STATE KS. STATE KS. STATE KS. STATE KS. STATE KS. STATE SEC: STATE KS. STATE SEC: STATE SEC
	HALLIBURTON LOGGING SERVICES, INC. DPEN HOLE	COMPANY 4ELL 4ELL 4ELL 11ELD 11ELD 0000117 11ELD 000117 111 111 111 111 111 111 111 111 112 113 114
FUG FILE	DPEN	Image: Solution of the second of the seco

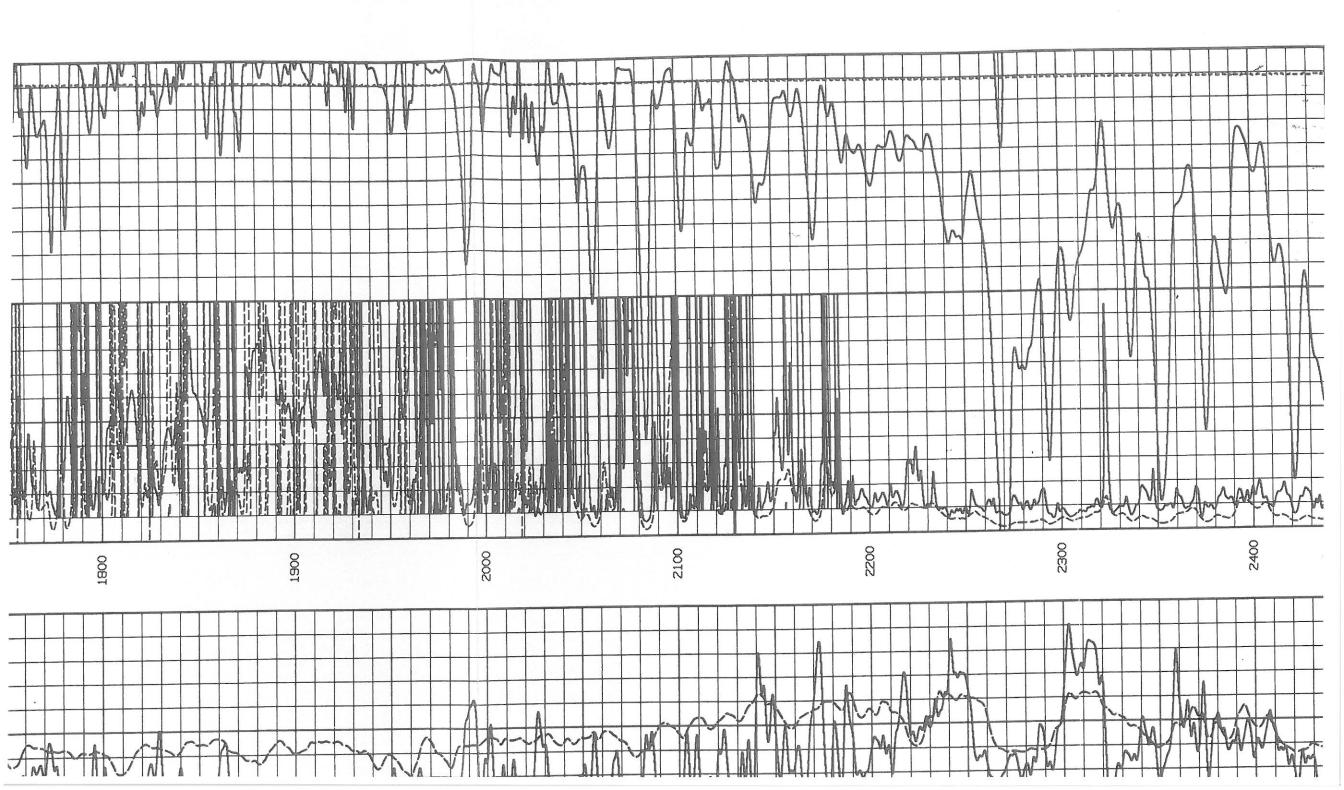
.

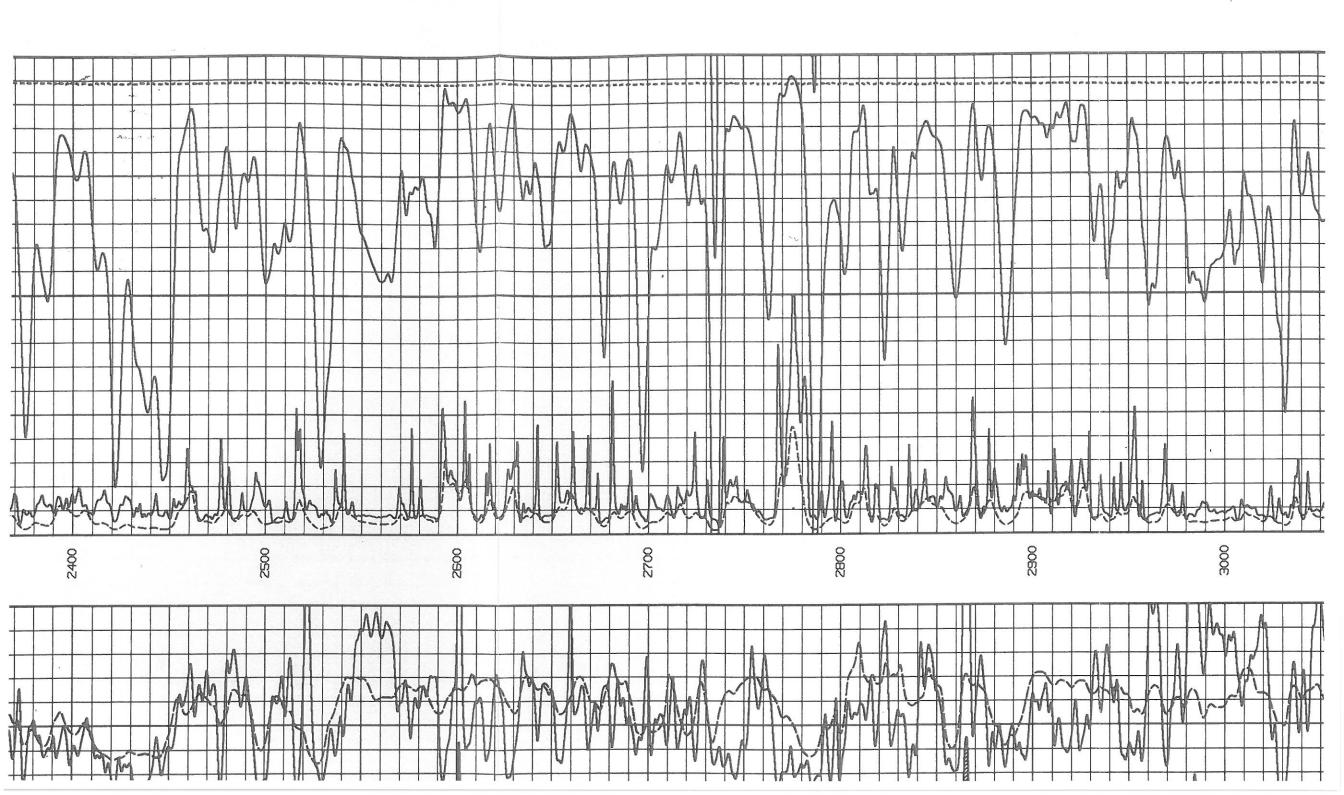
.

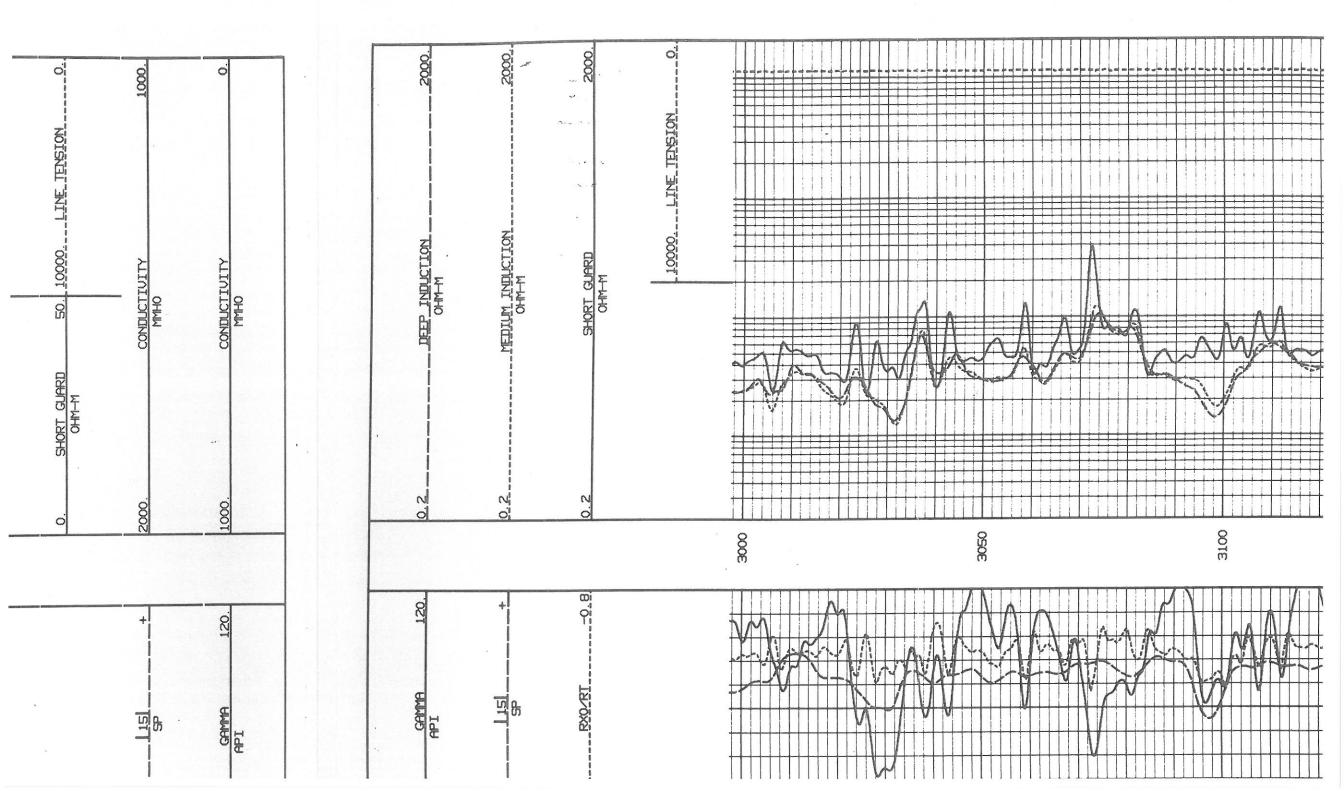
DEEP INDUCTIONSOOHM-M						
I	<u>8</u>	+ + + + + + + + + + + + + + + + + + +	CASING CASING	-+-HJ⊢++₽++- €	<u></u>	° 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8
•	h Mary Mary	MMMM				

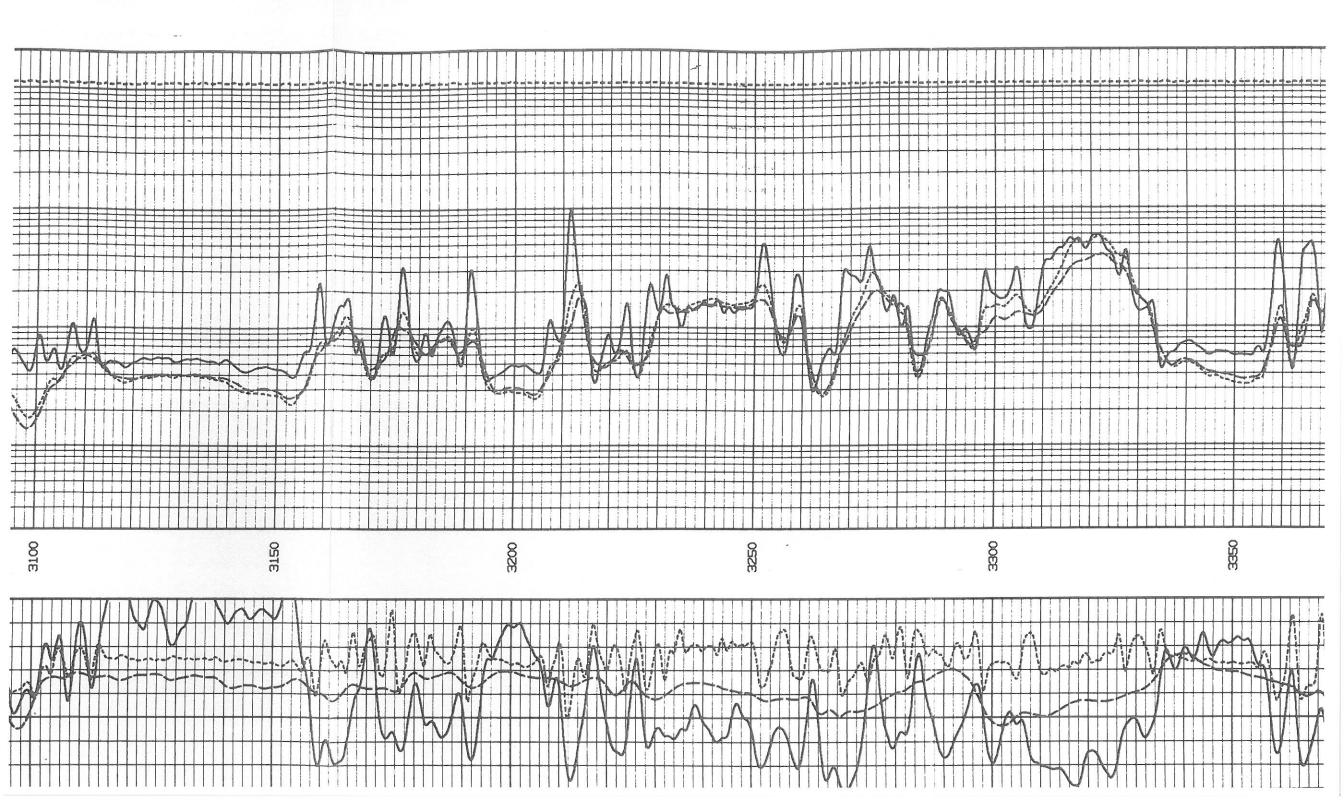
		Y-N-M-ALHA-h-H-11-h		
				M
		THE TRANSPORT		
				M
		int 3 mit is set in the set of th	-An MARAMA	March
400 200	800		100	500
	w in the second s		T	1
	<u></u>			
			AAA MALA	
			MANULA AAAAA	- Ma
A DALAMA A VE AN A A MA				
V	MAN MALANDAAAA			MM
V				NYYYY
M.M.M.M.M.M.M.M.M.M.M.M.M.M.M.M.M.M.M.	PP In A MANA			

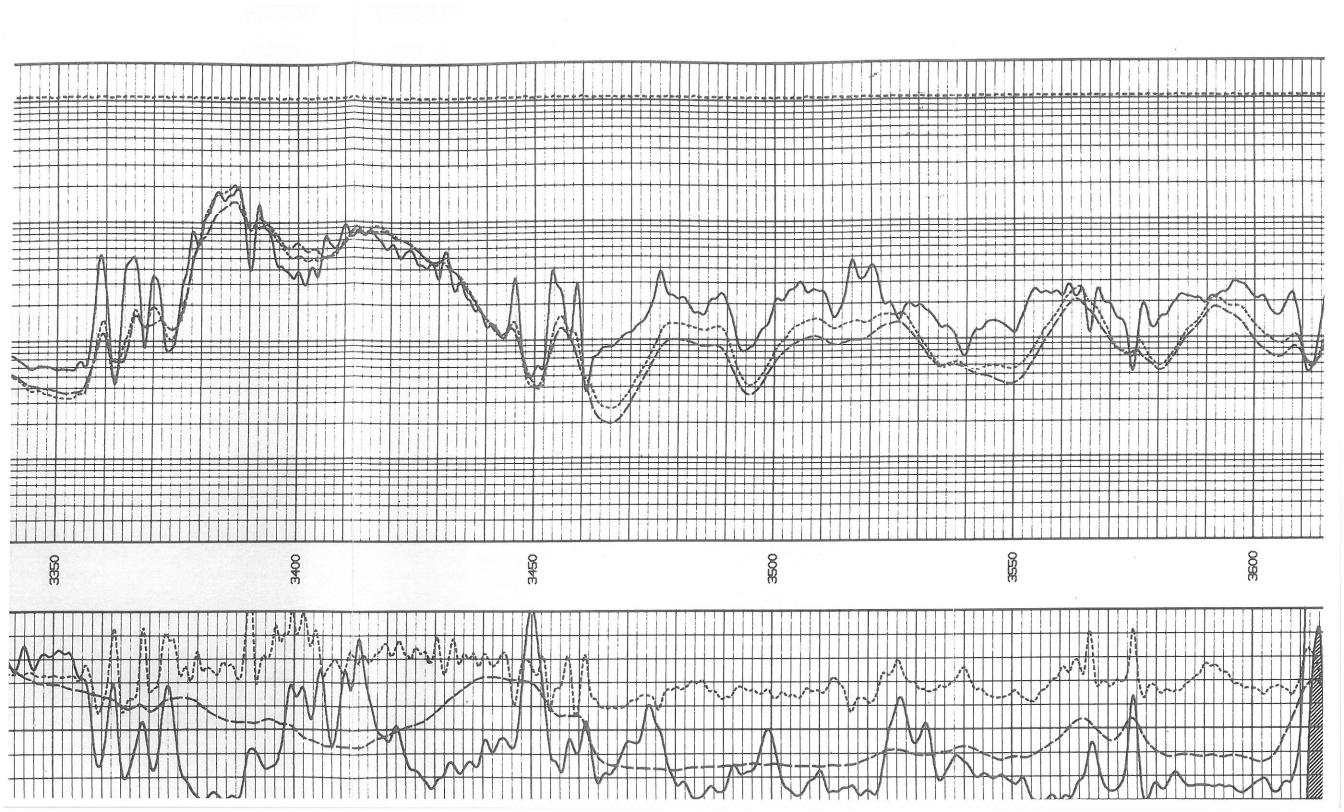


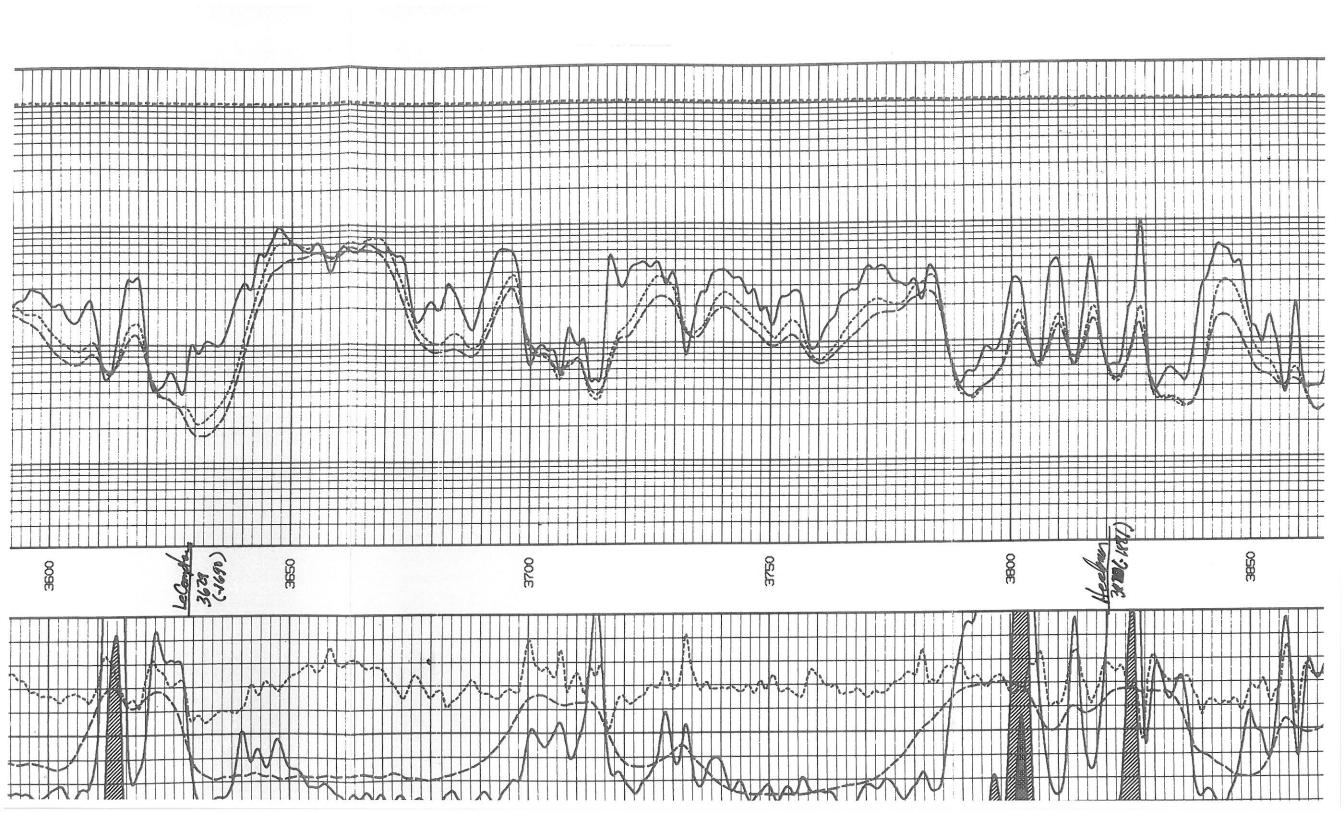


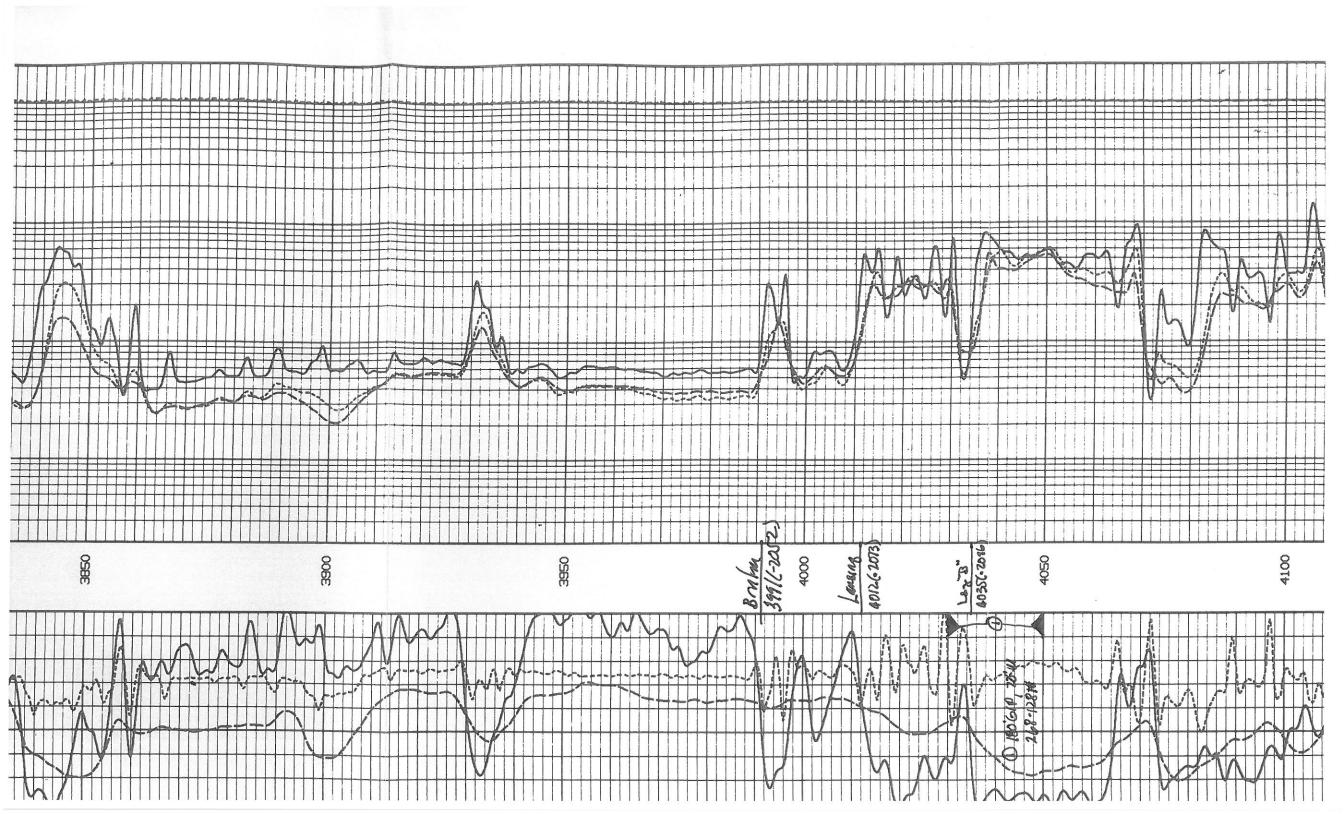




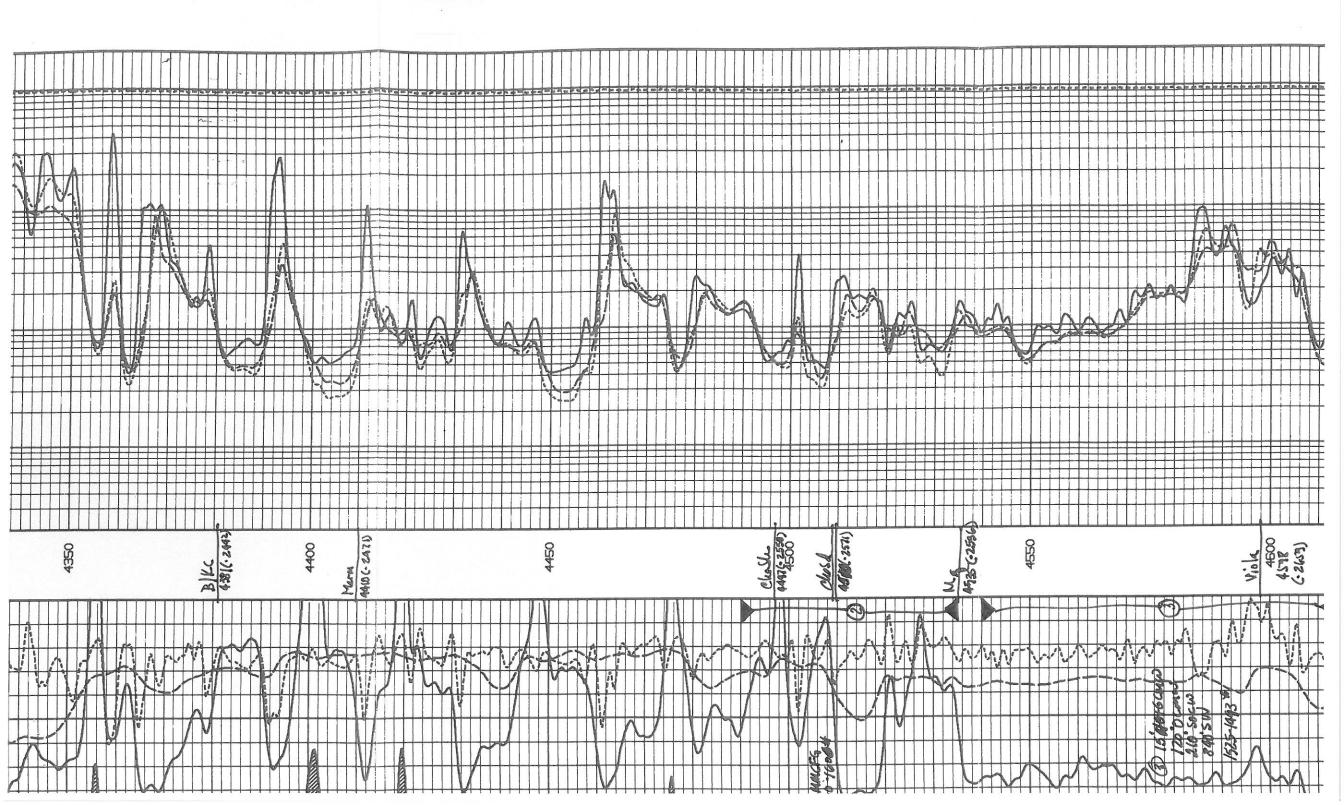


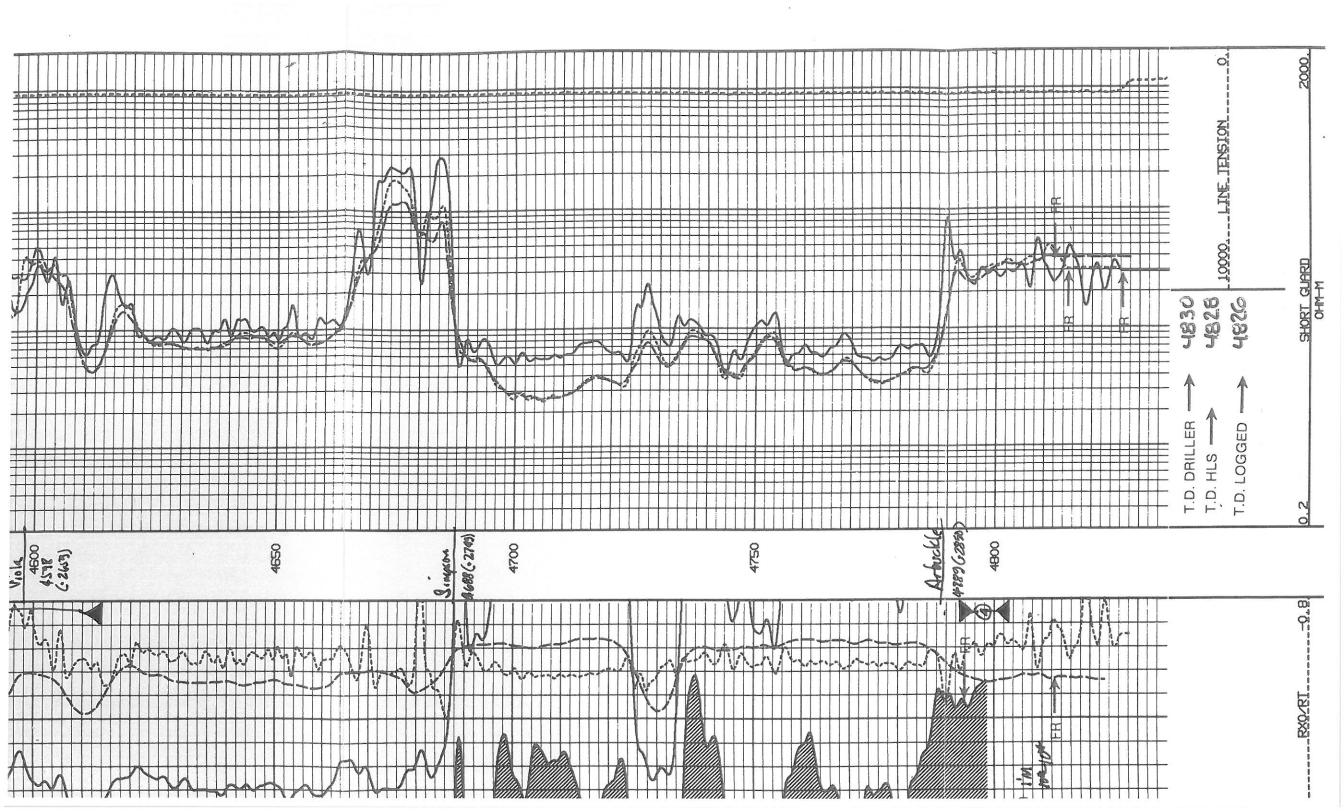






╶┼╉┼┽┿┽╉┽┽┥┫╸╷┧╋┝╖┝┿╋┥┥┝┿┥					
4 8 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	4150	624 002 1	4250	Stark	





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

March 03, 2015

Jack Gurley Pickrell Drilling Company, Inc. 100 S MAIN STE 505 WICHITA, KS 67202-3738

Re: Plugging Application API 15-007-22403-00-00 LEE F 1 NE/4 Sec.04-30S-15W Barber County, Kansas

Dear Jack Gurley:

The Conservation Division has received your Well Plugging Application (CP-1).

Under K.A.R. 82-3-113(b)(2), you must notify DISTRICT 1 of your proposed plugging plan at least 5 days before plugging the well. DISTRICT 1's phone number is (620) 225-8888. Failure to notify DISTRICT 1, or failure to file a Well Plugging Record (CP-4) after the well is plugged will result in a penalty recommendation.

Under K.A.R. 82-3-600, you must file an Application for Surface Pit (CDP-1) if you wish to use a workover pit while plugging the well. Failure to timely file a CDP-1, failure to timely remove fluids, or failure to timely file Closure of Surface Pit (CDP-4) or Waste Transfer (CDP-5) forms will result in a penalty recommendation.

This receipt does NOT constitute authorization to plug this well if you do not otherwise have the legal right to do so.

This receipt is VOID after September 03, 2015. If the well is not plugged by then, you will have to submit a new CP-1 if you wish to plug the well.

The September 03, 2015 deadline does NOT override any compliance deadline given to you by Legal, District, or other Commission Staff. Failure to comply with any given deadline will still result in the Commission assessing penalties, or taking other legal action.

Sincerely, Production Department Supervisor

cc: DISTRICT 1