



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	Zenergy Operating Company, LLC
Well Name	Jost 2-30H
Doc ID	1226648

Perforations And Bridge Plug Sets

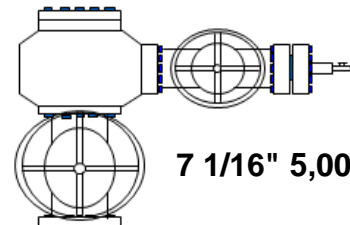
Perforation Top	Perforation Base	Formation	Bridge Plug Depth
3144	5456	Mississippian	3800

Zenergy Operating Co.

Jost 2-30H

Section 30 - T19S - R2E

Marion County, KS



7 1/16" 5,000 psi Frac Tree

TEMPORARILY ABANDONED

Cemented Liner: 8 Plug and Perf Stages

KB: 1,464'
KB corr: 20'
GL: 1,444'
API No. 15-115-21437

PROPOSED PERFORATION SUMMARY

Stage Number	Interval Top	Interval Bottom	Interval Length	Frac Plug Depths	Top Perforation Depths						Number Holes	Remarks
					1	2	3	4	5	6		
TD	5,524											
FS	5,456											
FC	5,453											
LC	5,451											
WSBPS	5,448											Wet Shoe Bypass Sub
1	5,140	5,524	384	-	5,183	5,234	5,285	5,336	5,387	5,438	72	TCP on CT, 2' Clusters, 6 spf, 60° phasing
2	4,908	5,140	232	5,140	4,918	4,972	5,052	5,104	-	-	48	2' Clusters, 6 spf, 60° phasing
3	4,658	4,908	250	4,908	4,680	4,753	4,806	4,860	-	-	48	2' Clusters, 6 spf, 60° phasing
4	4,263	4,658	395	4,658	4,295	4,365	4,444	4,517	4,578	-	60	2' Clusters, 6 spf, 60° phasing
5	4,038	4,263	225	4,263	4,047	4,097	4,162	4,221	-	-	48	2' Clusters, 6 spf, 60° phasing
6	3,813	4,038	225	4,038	3,821	3,875	3,929	3,995	-	-	48	2' Clusters, 6 spf, 60° phasing
7	3,585	3,813	228	3,813	3,603	3,663	3,718	3,771	-	-	48	2' Clusters, 6 spf, 60° phasing
8	3,145	3,579	434	3,585	3,202	3,297	3,367	3,452	3,542	-	30	1' clusters, 6 spf, 60° phasing

SURFACE CASING:
9 5/8" 36.0#, LS, STC
8rd, Shoe set @ 235',
circ cmt to surf.

INTERMEDIATE CASING:
7" 26#, J-55, LT&C @
3,144' MD, 2,710' TVD, Cmt
to surf. TOC- 2,130' CBL

12 1/4" Hole

235'

8 3/4" Hole

Tubing is as follows:
Date: 7/13/2013:
TIH with 86 jts (2,725') 2-7/8" 6.5# J-55 8RND EUE tubing

KOP = 1,990' TVD, MD, BUR
8.5°/100', build to 60° @ 2,686,
hold 60° to 2,841', BUR
11.5°/100', build to 90° @
3,144' MD, 2,710' TVD

60° tangent , 2,686 to 2,841'

4 1/2" CIBP set @ 3,800'

7" GS @ 3,144' MD, 2,710 TVD

6.125" Hole, Cemented Liner

Float Collar @ 5,453'

Float Shoe @ 5,456'

TOL @ 2,841' @ 60° inclination

TD = 5,524' MD
= 2,726 TVD

PRODUCTION LINER:
4 1/2" 11.6#, N-80,
LT&C, TOL @ 2,841'
MD, FS @ 5,456' MD

Total Stages: 8

8 Plug and Perf stages

Upper Mississippian Lateral

Edit: 8/23/2013 SML

Summary of Changes

Lease Name and Number: Jost 2-30H

API/Permit #: 15-115-21437-01-00

Doc ID: 1226648

Correction Number: 1

Field Name	Previous Value	New Value
Approved Date	09/10/2014	10/08/2014
Production Casing Cemented With	340	500
Production Casing Set At	5456	3144
Production Casing Size	4.5000	7.0000
Save Link	../../../../kcc/detail/operatorE ditDetail.cfm?docID=12 22063	../../../../kcc/detail/operatorE ditDetail.cfm?docID=12 26648

Summary of Attachments

Lease Name and Number: Jost 2-30H

API: 15-115-21437-01-00

Doc ID: 1226648

Correction Number: 1

Attachment Name

Jost 2-30H Wellbore Schematic