



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

I

Form	CP1 - Well Plugging Application
Operator	Barker, Bob dba Barker Oil
Well Name	BARKER OIL 9
Doc ID	1227985

Perforations And Bridge Plug Sets

Perforation Top	Perforation Base	Formation	Bridge Plug Depth
750	757	Bartlesville	0

WELL RECORD

API # 15-133-24,834

Well No. # 9 Farm Barker.Gordon,

Producer Barker oil co.(Operator #8997)

Location 1150'N & 4930'W of SE corner-NW SW-SW-Sec 4 Twp. 27 S Rg. 18 E

Elevation _____ State Kansas County Neosho

Kind (Oil, Gas, Water, Dry Hole) (Oil) Contractor Way Drilling Co.

Producing formation _____ Top (750' Bottom 757')

Shot with _____ qts. _____ from _____ to _____

Packer Set at _____ Kind _____ Size _____

Liner _____ from _____ to _____ Perforated from _____ to _____

LOG

Thick-ness	Strata	Depth	Thick-ness	Strata	Depth
18	Soil clay	18	6	Lime (5')	597
9	Silt-Sand gravel	27	5	Shale gy dk	602
8	Shale	35	4	Sand	606
11	Lime	46	20	Shale L gy sdy	626
16	Shale gy sdy/sd	62	6	Shale dk	632
9	Sand/sh(oil 62-6	71	2	Shale gy /lm	634
5	Shale gy	76	4	Sand dk VLO	638
66	Lime br wt gy	142	35	Shale D(lm 58-60)	673
5	Slate bl	147	1	Coal	674
6	Lime br Hrd	153	2	Lime br gy	676
7	Shale gy sdy	160	12	Shale gy	688
18	Lime	178	2	Lime br (2')	670
4	Shale dk	182	5	Slate dk/coal	675
38	Lime	220	5	Sand gy Br VLO	680
5	Sand	225	37	Shale gy dk	717
10	Shale gy sdy	335	23	Shale GBT(C725)	740
4	Shale dk	339	1	Coal	741
11	Sand L/shl lm st	350	9	Shale gy sdy	750
21	Shale gy sdy/sd	371	1	Sand oil bl(core	751
13	Shale dk sdy	384	4	Sand O V lite B	755
4	Lime/sd shl	388	2	Sand/sh some bl	757
11	Shale& sd/lm stk	399	2	Shale G sdy VLB	759
1	Lime	400	8	Shale gy sdy	767
2	Shale gy	402	14	Shale dk	781
11	Lime	413	28	Shale gy	809
33	Sand/lm shl	446	(Total depth 809)		
30	Shale sdy	476			
5	Sand gy	481			
25	Shale gy	506			
19	Lime (30')	525			
3	Slate dk	528			
2	Lime (40')	530			
6	Slate shl dk	536			
32	Shale gy	568			
17	Lime (20')	585			
6	Slate	591			

Total Depth: 809'

~~809'~~ Cement surface 8 sacks.

Casing 6 5/8" at 36'

Casing 2 1/2" EUE at 806'

Casing _____ at _____

Cement The 2 1/2" to the surface

Tubing _____

~~809'~~ Seating nipple @ 747'

Additional Information

Core # 1 from - 750

3 1/2	Min Sand Oil Bleed/gas	751
3	" Sand Oil V Lite bld (H2O)	752
3	" " " " " "	753
3 1/2	" " " " " "	754
4	" " " " " "	755
3 1/2	" Sand/shl Bleed some gas	756
5 1/2	" " " " " "	757
4 1/2	PND Shale G S VV lite bld	758
5 1/2	" " " " " "	759

Core was taken to oil field research lab for analysis

Top ft 751 bleed well/no H2O
ft 752-55 lite bleeding/considerable H2O

756&57 Bleed in stks no H2O
758&59 Bleed VV little no H2O

Date Completed 4/23/85 -- 4/25/85

O. K.

Superintendent

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

October 29, 2014

Bob Barker
Barker, Bob dba Barker Oil
PO BOX 216
CHANUTE, KS 66720-0216

Re: Plugging Application
API 15-133-24834-00-00
BARKER OIL 9
SW/4 Sec.04-27S-18E
Neosho County, Kansas

Dear Bob Barker:

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

Under K.A.R. 82-3-113(b)(2), you must notify DISTRICT 3 of your proposed plugging plan at least 5 days before plugging the well. DISTRICT 3's phone number is (620) 432-2300. Failure to notify DISTRICT 3, 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 April 29, 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 April 29, 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 3