



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	Vincent Oil Corporation
Well Name	PETERS 1
Doc ID	1242321

Perforations And Bridge Plug Sets

Perforation Top	Perforation Base	Formation	Bridge Plug Depth
4780	4782	Marmaton	
4794	4796	Altamont	
4823	4826	Pawnee	
4919	4928	Mississippian	

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION OR RECOMPLETION FORM
ACO-1 WELL HISTORY
DESCRIPTION OF WELL AND LEASE

Operator: License # 5004
Name Vincent Oil Corporation
Address 125 N. Market, Suite 1110
Wichita, KS 67202
City/State/Zip

Purchaser

Operator Contact Person Donna Manda
Phone 316-267-3573

Contractor: License # 6033
Name Murfin Drilling Company

Wellsite Geologist John P. Hastings
Phone 316-262-3573

Designate Type of Completion
 New Well Re-Entry Workover
 Oil SWD Temp Abd
 Gas Inj Delayed Comp.
 Dry Other (Core, Water Supply etc.)

If ONWO: old well info as follows:
Operator
Well Name
Comp. Date Old Total Depth

WELL HISTORY

Drilling Method:
 Mud Rotary Air Rotary Cable
9-17-86 9-28-86
Spud Date Date Reached TD Completion Date
5030'
Total Depth PBTD 8-5/8" @ 319'
Amount of Surface Pipe Set and Cemented at...feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set...feet
If alternate 2 completion, cement circulated from...feet depth to...w/...SX cmt
Cement Company Name
Invoice #

API NO. 15-097-21,220
County Kiowa
C E/2 NE Sec 17 Twp 29S Rge 18 East West

3960 Ft North from Southeast Corner of Section
660 Ft West from Southeast Corner of Section
(Note: Locate well in section plat below)

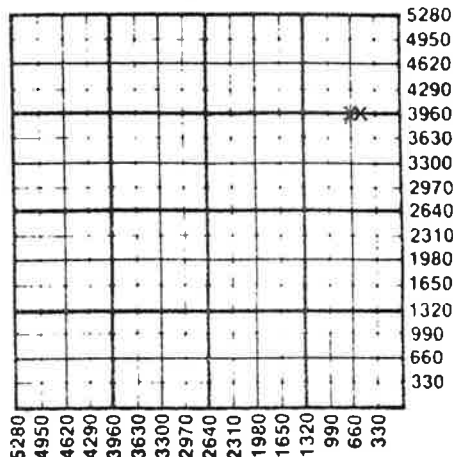
Lease Name Peters Well # 1

Field Name Nichols North

Producing Formation Mississippian

Elevation: Ground 2229 KB 2238

Section Plat



WATER SUPPLY INFORMATION

Disposition of Produced Water: Disposal Repressuring
Docket #

Questions on this portion of the ACO-1 call:

Water Resources Board (913) 296-3717
Source of Water: Hauled.
Division of Water Resources Permit #
Groundwater...Ft North from Southeast Corner (Well) ...Ft West from Southeast Corner of Sec Twp Rge East West
Surface Water...Ft North from Southeast Corner (Stream, pond etc)...Ft West from Southeast Corner Sec Twp Rge East West
Other (explain) (purchased from city, R.W.D. #)

INSTRUCTIONS: This form shall be completed in triplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 120 days of the spud date of any well. Rule 82-3-130, 82-3-107 and 82-3-106 apply. Information on side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form. See rule 82-3-107 for confidentiality in excess of 12 months. One copy of all wireline logs and drillers time log shall be attached with this form. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Signature Richard A. Hebsch
Title Vice President Date 10-17-86

Subscribed and sworn to before me this 17th day of October 1986
Notary Public June K. Burnett
Date Commission Expires 3-30-89

K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
C Drillers Timelog Received
Distribution
KCC SWD/Rep NGPA
KGS Plug Other (Specify)



Sec...Twp...Rge...

Operator Name Vincent Oil Corporation Lease Name Peters Well # 1

Sec 17 Twp 29S Rge 18 East West County Kiowa

WELL LOG

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface during test. Attach extra sheet if more space is needed. Attach copy of log.

Drill Stem Tests Taken Yes No
 Samples Sent to Geological Survey Yes No
 Cores Taken Yes No

DST #1 - 3481'-3580' (30-45-15-30)
 1st open: wk blo bldg to strong
 2nd open: strong blo throughout
 Rec: 50' mud, 120' wtry mud
 IFP 41-63 ISIP 1132
 FFP 93-93 FSIP 1091

DST #2 - 4304'-4330' (30-45-30-45)
 1st open: strong blo throughout
 2nd open: " " "
 Rec: 655' gas in pipe, 125' gas cut mud w/
 show of oil on top of tool
 IFP 41-52 ISIP 1350
 FFP 62-72 FSIP 1215

DST #3 - 4774'-4833' (45-60-45-60)
 1st open: strg blo, gas to surface in 15"
 26.6 MCFG/20" - 47.2 MCFG/45"
 2nd open: gas to surface immediate
 78.1 MCFG/5" - stab. 47.7 MCFG
 Rec: 70' mud
 IFP 62-52 ISIP 1475
 FFP 52-31 FSIP 1495

Name	Formation Description	
	Top	Bottom
Cottonwood	3046	(- 808)
Stotler	3476	(-1238)
Emporia	3560	(-1322)
Heebner Shale	4118	(-1880)
Brown Lime	4293	(-2055)
Lansing	4300	(-2062)
Stark Shale	4616	(-2378)
Base K.C.	4718	(-2480)
Marmaton	4780	(-2542)
Pawnee	4810	(-2572)
Cherokee Shale	4852	(-2614)
Bs. Cherokee Lst.	4878	(-2640)
Mississippian	4918	(-2680)
LTD	4988	

CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs/Ft.	Setting Depth	Type of Cement	#Sacks Used	Type and Percent Additives
Surface	12 1/2"	8-5/8"		319'	Lite	100	3% CC
Production		4-1 1/2"	10.5	502'	Class A Surti	75	3% CC

PERFORATION RECORD		Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	
Shots Per Foot	Specify Footage of Each Interval Perforated		Depth
4	4919-28	500 gals. 15% MCA w/. double strength. FE. & NE.	4919-28

TUBING RECORD		Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Size	Set At	Packer at	
2-3/8"	4934.88		

Date of First Production	Producing Method <input checked="" type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (explain).....			
Waiting on pipeline				
Estimated Production Per 24 Hours	Oil Bbls	Gas MCF	Water Bbls	Gas-Oil Ratio CFPB
		1900 MCFD		

METHOD OF COMPLETION

Production Interval

Disposition of gas: Vented Sold Used on Lease
 Open Hole Perforation Other (Specify)
 Dually Completed Commingled

4919-28



#1 Peters

DST #4 - 4838'-4932' (30-45-45-60)

1st open: strg blo, gas to surface in 2''

3.5 MMCFG/5'' - 6.16 MMCFG/30''

2nd open: gas to surface immediate

5.69 MMCFG/5'' - 6.64 MMCFG/stab.

Rec: 30' wtr

IFP 1101-1091 ISIP 1257

FFP 1101-1101 FSIP 1257

DST #5 - 4905'-4953' (30-45-30-45)

1st open-strg blo, gas to surface in 2''

5.21 MMCFG/10'' - 5.69 MMCFG/25''

2nd open: gas to surface immediate

6.16 MMCFG/10'' & stab.

Rec: 30' muddy gassy wtr

IFP 1008-1008 ISIP 1257

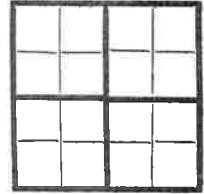
FFP 1070-1080 FSIP 1257

WELL LOG

COMPANY Vincent Oil Corporation
 1110 KSB&T Bldg.
 Wichita, KS 67202
FARM PETERS NO. 1
RIG. NO. 21
TOTAL DEPTH 5030'
COMM. 9-17-86 **COMP.** 9-29-86
CONTRACTOR Murfin Drilling Company
 250 N. Water, Suite 300
 Wichita, KS 67202

SEC. 17 T. 29S R. 18W
 LOC. C E/2 NE

COUNTY Kiowa
KANSAS

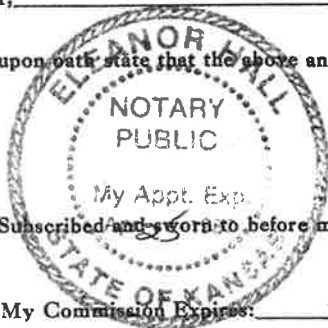


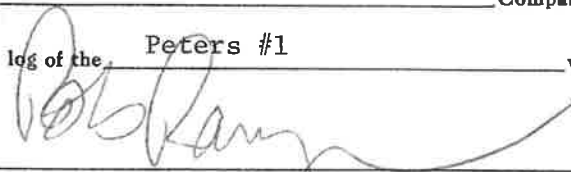
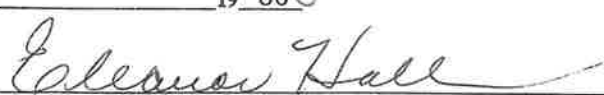
CASING
 20 10
 15 8 -5/8" csg set @ 319' w/100 sx Lite, 3% cc + ELEVATION
 12 6 75 sx Class A, 3% cc.
 13 5
 4-1/2" csg set @ 5026' w/125 sx Surefill. PRODUCTION
FIGURES INDICATE BOTTOM OF FORMATIONS

Sand & Shale	115'
Shale	320'
Sand & Shale	690'
Shale	1393'
Anhydrite	1409'
Shale	3215'
Lime & Shale (RTD)	5030'

State of Kansas
 County of Sedgwick } ss:

I, Rob Ramseyer of the Murfin Drilling Company
 upon oath state that the above and foregoing is a true and correct copy of the log of the Peters #1 well.




Rob Ramseyer, Agent for Operator
 19 86

Eleanor Hall NOTARY PUBLIC

My Commission Expires: 4-25-87
 Subscribed and sworn to before me this 7th day of October 19 86

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 5004
 Name: Vincent Oil Corporation
 Address: 125 N. Market, Suite 1075
 City/State/Zip: Wichita, Kansas 67202
 Purchaser: Kansas Gas Supply
 Operator Contact Person: Richard A. Hiebsch
 Phone: (316) 262-3573
 Contractor: Name: _____
 License: _____
 Wellsite Geologist: _____
 Designate Type of Completion:
 _____ New Well _____ Re-Entry Workover
 _____ Oil _____ SWD _____ SIOW _____ Temp. Abd.
 Gas _____ ENHR _____ SIGW
 _____ Dry _____ Other (Core, WSW, Expl., Cathodic, etc)
 If Workover/Re-entry: Old Well Info as follows:
 Operator: Vincent Oil Corporation
 Well Name: Peters #1
 Original Comp. Date: 10-16-86 Original Total Depth: 5030
 _____ Deepening _____ Re-perf. _____ Conv. to Enhr./SWD
 _____ Plug Back _____ Plug Back Total Depth
 Commingled _____ Docket No. _____
 _____ Dual Completion _____ Docket No. _____
 _____ Other (SWD or Enhr.?) _____ Docket No. _____
 _____ Spud Date or _____ Date Reached TD _____ Completion Date or
 _____ Recompletion Date _____ Recompletion Date 2-25-2000

API No. 15 - 097-21,220
 County: Kiowa
 S/2 NE _____ Sec. 17 Twp. 29 S. R. 18 East West
1320 feet from S / (N) (circle one) Line of Section
660 feet from (E) / W (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE NW SW
 Lease Name: Peters Well #: 1
 Field Name: Nichols North
 Producing Formation: Altamont, Pawnee, Mississippian
 Elevation: Ground: 2229 Kelly Bushing: 2238
 Total Depth: 5030 Plug Back Total Depth: _____
 Amount of Surface Pipe Set and Cemented at 319 Feet
 Multiple Stage Cementing Collar Used? Yes No
 If yes, show depth set _____ Feet
 If Alternate II completion, cement circulated from _____
 feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan
 (Data must be collected from the Reserve Pit)
 Chloride content _____ ppm Fluid volume _____ bbls
 Dewatering method used _____
 Location of fluid disposal if hauled offsite: _____
 Operator Name: _____
 Lease Name: _____ License No.: _____
 Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
 County: _____ Docket No.: _____

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form (see rule 82-3-107 for confidentiality in excess of 12 months). One copy of all wireline logs and geologist well report shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.
 Signature: Richard H. Diebel
 Title: President Date: 6-21-00
 Subscribed and sworn to before me this 21st day of June, 2000
 Notary Public: _____
 Date Commission Expires: _____

KCC Office Use ONLY
 _____ Letter of Confidentiality Attached
 if Denied, Yes Date: _____
 _____ Wireline Log Received
 _____ Geologist Report Received
 _____ UIC Distribution

Side Two

Operator Name: Vincent Oil Corporation Lease Name: Peters Well #: 1
 Sec. 17 Twp. 29 S. R. 18 East West County: Kiowa

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface test, along with final chart(s). Attach extra sheet if more space is needed. Attach copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <input type="checkbox"/> Yes <input type="checkbox"/> No (Attach Additional Sheets) Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No (Submit Copy) List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
--	---

CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacs Used	Type and Percent Additives
Surface	12 1/4"	8 5/8"		319'	Lite/Class A	175	3% cc
Production	7 7/8"	4 1/2"	10.5	5027'	Surfill	115	3% cc

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
___ Perforate				
___ Protect Casing				
___ Plug Back TD				
___ Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plug Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
4	4919 - 4982 Mississippian	500 gals 15% MCA in each set of perfs	
4	4780 - 4782 Altamont	1000 gals 20% XTA acid in each set of perfs	
4	4794 - 4796 Altamont	4780 - 82 & 4823 - 4826	
4	4823 - 4826 Pawnee		

TUBING RECORD	Size <u>2 3/8</u>	Set At <u>4953 ft.</u>	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---------------	-------------------	------------------------	-----------	---

Date of First, Resumed Production, SWD or Enhr. <u>Resumed 2-25-00</u>	Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
---	--

Estimated Production Per 24 Hours	Oil <u>0</u> Bbls.	Gas <u>150</u> Mcf	Water <u>40</u> Bbls.	Gas-Oil Ratio	Gravity
-----------------------------------	--------------------	--------------------	-----------------------	---------------	---------

Disposition of Gas <input type="checkbox"/> Vented <input checked="" type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <small>(If vented, Sumit ACO-18.)</small>	METHOD OF COMPLETION <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input checked="" type="checkbox"/> Commingled	Production Interval <u>per perforation record</u>
<input type="checkbox"/> Other (Specify) _____		

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

February 20, 2015

M. L. Korphage
Vincent Oil Corporation
155 N MARKET STE 700
WICHITA, KS 67202-1821

Re: Plugging Application
API 15-097-21220-00-00
PETERS 1
NE/4 Sec.17-29S-18W
Kiowa County, Kansas

Dear M. L. Korphage:

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 August 20, 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 August 20, 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