



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	BRENT B 1
Doc ID	1242389

Perforations And Bridge Plug Sets

Perforation Top	Perforation Base	Formation	Bridge Plug Depth
3605	3610	Emporia Limestone	
4826	4833	Pawnee	

CURRENT OPERATOR
2/2015
VINCENT OIL CORP.

K.G.S. LIBRARY

5-27-18W
NW 1/4 SE 30
KCC

RELEASED
STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
Date: **SEP 1 1988**
WELL COMPLETION OR RECOMPLETION FORM
FROM CONFIDENTIAL
ACO-1 WELL HISTORY

3

API NO. 15-097-21,235
County: Kiowa
NW SW SE Sec. 3 Twp. 29S Rge. 18 East West

DESCRIPTION OF WELL AND LEASE

990 Ft North from Southeast Corner of Section
2310 Ft West from Southeast Corner of Section
(Note: Locate well in section plat below)

Lease Name: Brent 'B' Well # 1

Field Name: Ursula

Producing Formation: Mannaton (Pawnee)

Elevation: Ground 2273' KB 2283'
Section Plat

Operator: License # 5238
Name: PETROLEUM, INC.
Address: Suite 800, 300 W. Douglas
Wichita, Kansas 67202
City/State/Zip

Purchaser: Shut In

Operator Contact Person: Terry Naylor
Phone: 316-793-8471

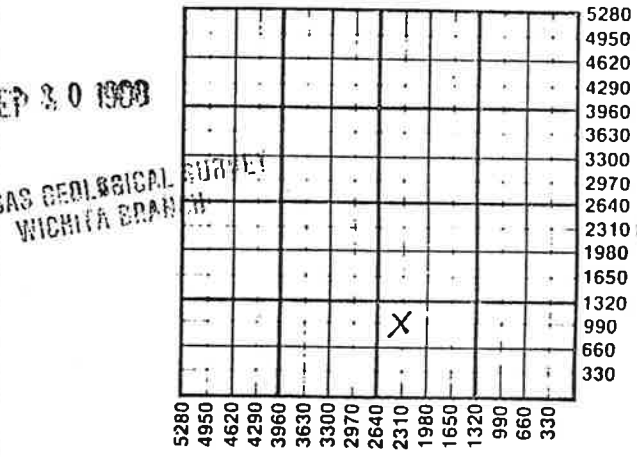
Contractor: License # 5104
Name: Blue Goose Drilling Co., Inc.

Wellsite Geologist: Mark Newman
Phone: 316/261-5224

Designate Type of Completion: Shut In
 New Well Re-Entry Workover

Oil SWD Temp Abd
 Gas Inj Delayed Comp.
 Dry Other (Core, Water Supply etc.)

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



WATER SUPPLY INFORMATION
Disposition of Produced Water: Disposal Repressuring
Docket # N/A

Questions on this portion of the ACO-1 call:
Water Resources Board (913) 296-3717

Source of Water:
Division of Water Resources Permit #

Groundwater: Ft North from Southeast Corner (Well) Ft West from Southeast Corner
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 Landowner... (purchased from city, R.W.D. #)

WELL HISTORY
Drilling Method: Mud Rotary Air Rotary Cable

4-20-87 5-1-87 SI
Spud Date Date Reached TD Completion Date
5018' 4917'
Total Depth PBTD

Amount of Surface Pipe Set and Cemented at 310' 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

INSTRUCTIONS: This form shall be completed in duplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 90 days after completion or recompletion of any well. Rule 82-3-130 and 82-3-107 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: Terry Naylor
Title: Kansas District Supt. Date: 8-13-87

Subscribed and sworn to before me this 13th day of Aug 1987.
Notary Public: Juan D. Munz

Date Commission Expires: 11-9-88

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

Sec. 3, Twp. 29, Rge. 18

AUG 17 1987

NOTARY PUBLIC - State of Kansas
JUAN D. MUNZ
My Appt. Exp. 11-9-88

SIDE TWO

Operator Name PETROLEUM, INC. Lease Name Brent 'B' Well # 1
 Sec. 3 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		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	Formation Description		
Samples Sent to Geological Survey		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Log	<input type="checkbox"/> Sample	
Cores Taken		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Name	Top	Bottom
DST #1	3578-3620' 15-30-60-120 Gauged 60.2 MCF/2nd open. Rec 150' gas cut mud. IFP 55-55#, ISIP 884#, FFP 55-55#, FSIP 907#			Stotler	3515 (-1232)	
DST #2	4323-4353' 15-30-60-120 Gauged 18.8 MCF/2nd open. Rec 200' drilling mud, 120' muddy water. IFP 55-55#, ISIP 1467#, FFP 110-110#, FSIP 1489#.			Emporia	3605 (-1322)	
DST #3	4790-4847' Misrun.			Heebner	4147 (-1864)	
DST #4	4790-4847' Misrun.			Stark	4630 (-2347)	
DST #5	4734-4847' 15-30-60-120 Gauged 415 MCF/2nd open. Rec 300' gas cut mud. IFP 110-110#, ISIP 1565#, FFP 110-110#, FSIP 1587#.			B/KC	4732 (-2449)	
DST #6	4940-4975' 15-30-60-120 Rec 600' gas in pipe, 60' slightly oil and gas cut mud, 60' gas and water cut mud w/sli trace oil. IFP 44-44#, ISIP 1105#, FFP 55-77#, FSIP 1489#.			Marm. X	4796 (-2513)	
				U. Cherokee	4846 (-2563)	
				Miss. Chert A	4932 (-2649)	

CASING RECORD <input checked="" type="checkbox"/> New & <input checked="" 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 1/4"	8 5/8"	20#	310'	65/35 Poz.	175	6% Gel
Production	7-7/8"	5 1/2"	14 & 15.5#	5015'	60/40 poz.	150	4% gel, 10% salt

PERFORATION RECORD		Acid, Fracture, Shot, Cement Squeeze Record	
Shots Per Foot	Specify Footage of Each Interval Perforated	(Amount and Kind of Material Used)	Depth
4	4826-33'	1000 gal. 15% N.E.	4826-33'

TUBING RECORD	Size	Set At	Packer at	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	2-3/8"	4769.85			

Date of First Production	Producing Method
Shut In Gas Well	<input checked="" type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (explain).....

Estimated Production Per 24 Hours	Oil	Gas	Water	Gas-Oil Ratio	Gravity
	Bbls	MCF	Bbls	CFPB	
		SHUT IN			

METHOD OF COMPLETION

Production Interval

Disposition of gas: Vented Open Hole Perforation
 Sold Other (Specify)4826-33!.....
 Used on Lease
 Dually Completed
 Commingled

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 23, 2015

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

Re: Plugging Application
API 15-097-21235-00-00
BRENT B 1
SE/4 Sec.03-29S-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 23, 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 23, 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