



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	Connell, Mark Allen
Well Name	ZVOLANEK A 4
Doc ID	1259534

Perforations And Bridge Plug Sets

Perforation Top	Perforation Base	Formation	Bridge Plug Depth
3282	3288	Arbukle	

API No. 15 — 053
County Number

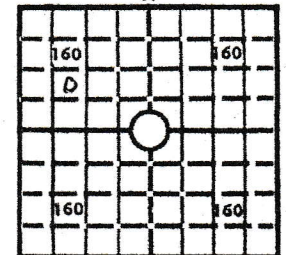
*25 btm
1300 35
1000 35*

S. 32 T. 15 R. 10 E W

Loc. NE SW NW

County Ellsworth

640 Acres
N



Locate well correctly

Elev.: Gr. 1079

DF 1082 KB 1084

Operator
Cities Service Co.

Address
700 Sutton Pl. Bldg., Wichita, Kansas 67202

Well No. 4 Lease Name Zvolanek "A"

Footage Location
1650 feet from (N) line 990 feet from (E) (W) line

Principal Contractor Duke Drilling Co. Geologist Well Site Sam Houston

Spud Date 7-14-77 Total Depth 3327' P.B.T.D. 3293'

Date Completed 8-21-77 Oil Purchaser Koch

CASING RECORD

Report of all strings set — surface, intermediate, production, etc.

Purpose of string	Size hole drilled	Size casing set (in O.D.)	Weight lbs/ft.	Setting depth	Type cement	Sacks	Type and percent additives
Surface	12 1/4"	8 5/8"	24#	235	50/50 Pozmix	150	3% CaCl-2
Production	7 7/8"	5 1/2"	14#	3326	50/50 Pozmix	200	75% CFR-2

LINER RECORD

PERFORATION RECORD

Top, ft.	Bottom, ft.	Sacks cement	Shots per ft.	Size & type	Depth interval
					3282-3288

Size	Setting depth	Packer set at
2"	3286'	-----

ACID, FRACTURE, SHOT, CEMENT SQUEEZE RECORD

Amount and kind of material used	Depth interval treated
500 Gallons 15% NE Acid	3282-3288

INITIAL PRODUCTION

Date of first production 8-21-77 Producing method (flowing, pumping, gas lift, etc.) Pumping

RATE OF PRODUCTION PER 24 HOURS
Oil 6 bbls. Gas MCF 184 bbls. Water Gas-oil ratio CFPI

Disposition of gas (vented, used on lease or sold) Producing interval(s) 3282-3288

DRILL LOG

DATE COMPLETED: July 14, 1977
 DATE COMPLETED: July 30, 1977

Cities Service Oil Company
 EVOLAMOK A-4
 NE SW NW
 Sec 32-T15-R10
 Ellsworth County, Kansas

MINNATION: 1798 K.S.

0 - 73' Surface Soil, Shale, Post Rock
 73 - 237' Shale, Sand
 237 - 480' Shale
 480 - 615' Red Bed, Shale
 615 - 635' Anhydrite
 635 - 1011' Red Bed, Shale, Shells
 1011 - 1165' Lime and Shale Streaks
 1165 - 1308' Shale, Shells
 1308 - 2574' Lime and Shale
 2574 - 2588' Shale and Sand
 2588 - 2838' Lime
 2838 - 2842' Shale
 2842 - 2858' Lime and Shale
 2858 - 2868' Lime
 2868 - 2936' Shale
 2936 - 2948' Lime and Shale
 2948 - 3220' Lime
 3220 - 3247' Lime and Shale
 3247 - 3278' Lime, Shale, Chert
 3278 - 3327' Dolomite
 3327' RTD

FORMATION TOPS

Anhydrite	615
Severy	2574
Topoka	2588
Neehner	2838
Toronto	2858
Douglas	2868
Brown Lime	2936
Kansas City	2948
Base K.C.	3220
Harmaton	3247
Arbuckle	3278
RTD	3327

SURFACE PIPE:

Set new 8 5/8", 24.7 pipe at
 235' w/150 sacks 50/50 Pozmix,
 2 1/2 Gal, 3 1/2 cc.

PRODUCTION PIPE:

Run new 14 3/4", 5 1/2" casing
 at 3326' w/175 sacks 50/50
 Pozmix, w/10 1/2 salt and .75
 GPM.

A F F I D A V I T

STATE OF KANSAS)
 COUNTY OF BARTON) ss.

I state that the facts and

CITIES SERVICE COMPANY

Russell
Daily Well History - Interim Report

INSTRUCTIONS: Interim Reports shall be completed and submitted with the Final Report for the well. Interim Reports are required for all drilling wells and may also be used for recording daily work on significant workovers. The description of work performed on Interim Reports should be a complete report of each days Drilling Activity. On significant wells the Tulsa Office may request Interim Reports as a sheet is filled out.

LEASE / UNIT NAME AND WELL NO.		REGION
Zvolanek A #4		Mid-Cont. North
COUNTY - PARISH - STATE - PROVINCE	FIELD OR PROSPECT NAME	AFE NUMBER
Ellsworth, KS	Noble	Information
DATE AND DEPTH	DESCRIPTION OF WORK PERFORMED	
10-18-77	Pulled rods, pump and tubing, to run tubing, to open Dv to cement above DV.	
10-19-77	Run Baker Retrievable bridge plug and port collar activating toop on 21 joints 2 EUE tubing set at 635' checking for port collar, found at 585' Set plug at 625', tried to open port collar, would not open, spotted 100 gals acid on port collar soak 30-40 minutes, finally worked port collar open. Injection rate 4 BPM at 350#, good circulation, mixed 150 sx Howco lite, pumped at 200# rate 45 gals per min at 250#, increased to 1½BPM at 200#, Cement circulated displaced cement to 480', closed port collar. Pressured up to 200# holding OR, washed out cement to top of bridge plug. Pulled out tools and tubing. Ran 2 x 3 perforate nip 2 x 1' seating nipple on 107 joints, 2 EUE tubing, sw at 3286'.	
10-20-77	Ran 1½ pump on 131-3/4 rods, BOP.	
10-21-77	Completed cement job above port collar.	

July 30, 2015

Mark Connell
Connell, Mark Allen
606 W ALBRO ST
CLAFLIN, KS 67525-9234

Re: Plugging Application
API 15-053-20477-00-00
ZVOLANEK A 4
NW/4 Sec.32-15S-10W
Ellsworth County, Kansas

Dear Mark Connell:

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

Under K.A.R. 82-3-113(b)(2), you must notify DISTRICT 2 of your proposed plugging plan at least 5 days before plugging the well. DISTRICT 2's phone number is (316) 630-4000. Failure to notify DISTRICT 2, 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 January 30, 2016. 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 January 30, 2016 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 2