



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



Operator:

J. Richard Burris
Gas, KS

Baker #1

Allen Co., KS
22-23S-18E
API: 001-31341

Spud Date: 12/29/2014
Surface Casing: 8 5/8"
Surface Length: 20.0'
Surface Cement: 4 sx
Longstring:

Surface Bit: 11"
Drill Bit: 6.75"
Longstring: P&A
Longstring Date: 2/12/2015

Driller's Log

Top	Bottom	Formation	Comments
1	121	Soil	
121	189	Lime	
189	256	Shale	
256	271	Lime	
271	329	Sandy Shale	
329	388	Lime	
388	396	Bl. Shale	
396	416	Lime	
416	421	Shale	
421	439	Lime	Base KC
439	617	Shale	Big Shale
617	620	Lime	
620	635	Shale	
635	658	Lime	
658	665	Sandy Shale	White
665	719	Shale	
719	739	Lime	
739	750	Shale	
750	758	Lime	
758	765	Shale	
765	780	Lime	20'
780	787	Shale	
787	793	Lime	5'

Baker #1
Allen Co., KS

793	817	Shale	
817	828	Sand	No show
828	831	Sand	Light oil saturation
831	834	Sand	Very light to no oil saturation
834	838	Sand	Fair oil saturation, watery
838	840	Sand	No oil, watery
840	852	Sand	Laminated with shale, spotty oil shows
852	919	Shale	
919	926	Sandy Shale	
926	934	Shale	
934	937	Sand	Laminated with shale, good bleed to pit
937	950	Sand	Laminated, mostly shale, spotty oil sat.
950		TD	

	Coring		
Run	Footage	Recovery	
1	818-838	20'	
2	838-858	20'	
3	937-950	13'	Plugged with shale

2/12/15 - Run drill pipe open ended to TD. Nipple up HSI.
Pump 20 sx at TD; pull to base of KC, pump 10 sx; pull to 250' pump cement to surface; TOOH, top off with cement, rig down.

3613A Y Road
Madison, KS 63860
Ph: 620-437-2661
Fax: 620-437-2881



HURRICANE SERVICES INC

104 Prairie Plaza Parkway
Garnett, KS 66032
Ph: 785-448-3100
Fax: 785-448-3102

FED ID# 48-1214033
MC ID# 165290

Remit to: Hurricane Services, Inc.
250 N. Water, Suite 200
Wichita, KS 67202

Customer:

TB&G, LLC
308 FAIRWAY AVE
IOLA, KS 66749

Invoice Date: 2/12/2015
Invoice #: 0016325
Lease Name: BAKER
Well #: 1
County: ALLEN

Date/Description	HRS/QTY	Rate	Total
See ticket 100556 of BB	1.000	790.000	790.00 T
Heavy Eq mileage one way	30.000	3.250	97.50 T
Cement Pozmix 60/40	98.000	12.000	1,176.00 T
Bentonite Gel	168.000	0.300	50.40 T
Vac truck 106 80bbl	4.000	84.000	336.00 T
Bulk truck #202	1.000	300.000	300.00 T

Net Invoice 2,749.90
Sales Tax: (7.40%) 203.49
Total 2,953.39

All invoices are due upon receipt. Interest at the rate of 1 1/2% per month may be charged on all invoices not paid within 30 days from date of invoice.

WE APPRECIATE YOUR BUSINESS!



250 N. Water, Ste 200 - Wichita, Ks 67202

HURRICANE SERVICES INC

104 Prairie Plaza Parkway - Garnett, Ks 66032

Customer:	T B & G, LLC		Customer Name:	Richard		Ticket No.:	100556	
Address:			AFE No.:			Date:	2/12/2015	
City, State, Zip:			Job type:	Plug to Abandon				
Service District:	Madison		Well Details:	950' of 6 3/4" hole				
Well name & No.:	Baker #1		Well Location:	22-23s-18e	County:	Allen	State:	Ks.
Equipment #	Driver	Equipment #	Driver	Equipment #	Hours	TRUCK CALLED		AM PM
201	Jerry					ARRIVED AT JOB		AM PM
202	Bryan					START OPERATION		AM PM
106	Kelly					FINISH OPERATION		AM PM
						RELEASED		AM PM
						MILES FROM STATION TO WELL		

Treatment Summary

Set cement plugs as following: 15 sks. @ 925', 15 sks. @ 450', 68 sks. @ 200' to surface

Product/Service Code	Description	Unit of Measure	Quantity	List Price/Unit	Gross Amount	Item Discount	Net Amount
C20101	Cement Pump (Longstring & Plug)		1.00	\$790.00	\$790.00		\$790.00
C00101	Heavy Equip. One Way	mi	30.00	\$3.25	\$97.50		\$97.50
P01603	60/40 Pozmix Cement	sack	98.00	\$12.00	\$1,176.00		\$1,176.00
P01607	Bentonite Gel	lb	168.00	\$0.30	\$50.40		\$50.40
C10600	Vacuum Truck 80 bbl	Hr.	4.00	\$84.00	\$336.00		\$336.00
C00104	Minimum Ton Mile Charge	ea	1.00	\$300.00	\$300.00		\$300.00

TERMS: Cash in advance unless Hurricane Services Inc has approved credit prior to sale. Credit terms of sale for approved accounts are total invoice due on or before the 30th day from the date of invoice. Past due accounts may pay interest on the balance past due at the rate of 1 1/4% per month or the maximum allowable by applicable state or federal laws if such laws limit interest to a lesser amount. In the event it is necessary to employ an agency and/or attorney to affect the collection of said account, Customer hereby agrees to pay all fees directly or indirectly incurred for such collection. In the event that Customer's account with HSI becomes delinquent, HSI has the right to revoke any and all discounts previously applied in arriving at net invoice price. Upon revocation, the full invoice price without discount will become immediately due and owing and subject to collection.

Gross:		\$ 2,749.90	Net:	\$ 2,749.90
Total Taxable	\$ 1,226.40	Tax Rate:	7.400%	
Frac and Acid service treatments designed with intent to increase production on newly drilled or existing wells are not taxable.		Sale Tax:	\$	90.75
		Total:	\$	2,840.65

Date of Service:	2/12/2015
HSI Representative:	Brad Butler "Thank You"
Customer Representative:	Richard

X _____
CUSTOMER AUTHORIZED AGENT

Customer Comments or Concerns:

Hurricane Services appreciates any Comments, Concerns or Criticism's from our valuable customers as Safety and Customer Satisfaction are our Number 1 goal. All Comments are confidential and will be used in a constructive manner to improve our Safety and Job Performance.

August 03, 2015

Mark Burris
Burris, J. R.
1902 HIGHWAY 54
BOX 345
IOLA, KS 66749

Re: Plugging Application
API 15-001-31341-00-00
Baker 1
SW/4 Sec.22-23S-18E
Allen County, Kansas

Dear Mark Burris:

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 February 03, 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 February 03, 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 3