



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	EDMONSTON 1
Doc ID	1267471

Perforations And Bridge Plug Sets

Perforation Top	Perforation Base	Formation	Bridge Plug Depth
4792	4796	Mississippian	

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form KSONA-1

July 2010

Form Must Be Typed

Form must be Signed

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KANSAS SURFACE OWNER NOTIFICATION ACT**

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Select the corresponding form being filed:  C-1 (Intent)  CB-1 (Cathodic Protection Borehole Intent)  T-1 (Transfer)  CP-1 (Plugging Application)

OPERATOR: License # 5004  
Name: Vincent Oil Corporation  
Address 1: 155 N. Market St.  
Address 2: STE 700  
City: Wichita State: KS Zip: 67202 + \_\_\_\_\_  
Contact Person: M.L. Korphage, P.G.  
Phone: ( 316 ) 262-3573 Fax: ( 316 ) 262-3309  
Email Address: mlk@vincentoil.com

Well Location:  
\_\_\_\_ SW \_\_\_\_ NE \_\_\_\_ NE Sec. 31 Twp. 29 S. R. 18  East  West  
County: Kiowa  
Lease Name: Edmonston Well #: 1

*If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:*

**Surface Owner Information:**

Name: Donald Edmonston  
Address 1: RR 1  
Address 2: \_\_\_\_\_  
City: Greensburg State: KS Zip: 67054 + \_\_\_\_\_

*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.*

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I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date: 10/19/2015 Signature of Operator or Agent: M.L. Korphage Title: Geologist

SIDE ONE

Two (2) copies of this form shall be filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within thirty (30) days after the completion of a well, regardless of how the well was completed.

Attach separate letter of request if the information is to be held confidential. If confidential, only file one copy. Information on Side One will be of public record and Side Two will then be held confidential.

Applications must be made on dual completion, commingling, salt water disposal, injection and temporarily abandoned wells.

Attach one copy only wireline logs (i.e. electrical log, sonic log, gamma ray neutron log, etc.). (Rules 82-2-105 & 82-2-125) KCC# (316) 263-3238.

LICENSE # 5004 EXPIRATION DATE 6/30/86

OPERATOR Vincent Oil Corporation API NO. 15-097-20,964

ADDRESS 1110 Kansas State Bank Building COUNTY Kiowa

Wichita, Kansas 67202 FIELD

\*\* CONTACT PERSON June K. Burnett PROD. FORMATION Marmaton  
PHONE 316-262-3573

PURCHASER BAM Energy LEASE Edmonston #1

ADDRESS WELL NO. 1

DRILLING Slawson Drilling Company, Inc. WELL LOCATION C. NE/4

CONTRACTOR 200 Douglas Building 990 Ft. from north Line and

ADDRESS 990 Ft. from east Line of

Wichita, Kansas 67202 the NE (Qtr.) SEC 31 TWP 29 RGE 18W.

PLUGGING N/A WELL PLAT

CONTRACTOR CONTRACTOR ADDRESS

CONTRACTOR ADDRESS

TOTAL DEPTH 5050 PBD 5120

SPUD DATE 9/27/83 DATE COMPLETED 12/06/83

ELEV: GR 2220 DF 2223 KB 2226

DRILLED WITH (CABLE) (ROTARY) (AIR) TOOLS.

DOCKET NO. OF DISPOSAL OR REPRESSURING WELL BEING USED TO DISPOSE OF WATER FROM THIS LEASE

Amount of surface pipe set and cemented 575 DV Tool Used? NO

THIS AFFIDAVIT APPLIES TO: (Circle ONE) - Oil, Gas, (Shut-in Gas,) Dry, Disposal, Injection, Temporarily Abandoned, OWWO. Other

ALL REQUIREMENTS OF THE STATUTES, RULES AND REGULATIONS PROMULGATED TO REGULATE THE OIL AND GAS INDUSTRY HAVE BEEN FULLY COMPLIED WITH.

A F F I D A V I T

RICHARD A. HIEBSCH, being of lawful age, hereby certifies that:

I am the Affiant, and I am familiar with the contents of the foregoing Affidavit. The statements and allegations contained therein are true and correct.

Richard A. Hiebsch (Name) Richard A. Hiebsch

SUBSCRIBED AND SWORN TO BEFORE ME this 1st day of November, 1983.



Ruth N. Benjamin (NOTARY PUBLIC) Ruth N. Benjamin

MY COMMISSION EXPIRES: June 17, 1985

\*\* The person who can be reached by phone regarding any questions concerning this information.

FILL IN W. LOG AS REQUIRED:

SHOW GEOLOGICAL MARKERS LOGS RUN, OR OTHER DESCRIPTIVE INFORMATION.

Show all important zones of porosity and contents thereof; core intervals, and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures, and recoveries.

FORMATION DESCRIPTION, CONTENTS, ETC.	TOP	BOTTOM	NAME	DEPTH
<b>DRILLERS LOG</b>			<b>ELECTRIC LOG TOPS:</b>	
0' to 1100' Shale			Heebner	4119 (-1893)
1100' to 1254' Shale & Shells			Toronto	4130 (-1904)
1254' to 4090' Shale			Douglas Shale	4147 (-1921)
4090' to 5050' Lime			Brown Lime	4300 (-2074)
RTD 5050'			Lansing KC	4314 (-2088)
			Swope	4596 (-2370)
			Base KC	4691 (-2465)
			Marmaton	4749 (-2523)
			Cherokee Shale	4868 (-2642)
			Basal Cher. Lime	4894 (-2668)
			Mississippian	4937 (-2711)
			LTD	5048
DST #1 - 4692-4819. 45, 45, 90, 90. 1st open, strong blow, gas to surface in 10 min.				
1st open gauged: 20 min./2.19 MMCF 2" choke				
25 min./1.25 MMCF "				
30 min./1.25 MMCF "				
35 min./1.14 MMCF "				
40 min./1.14 MMCF "				
45 min./1.14 MMCF "				
2nd open, let flow 1 hour because flowing mud to surface.				
2nd open gauged: 65 min./1.02 MMCF 2" choke				
70 min./1.02 MMCF "				
80 min./1.02 MMCF "				
85 min./1.02 MMCF "				
90 min./1.02 MMCF "				
Recovered 520 ft. slightly gas cut mud. IFP 333#-273# ISIP 1566#				
FFP 285#-238# FSIP 1566#				
BHT - 134				
DST #2 - 4816-4845. 20, 15, 15, 30. 1st open, no blow, flushed tool, no help; 2nd open, no blow, flushed tool, no help. (needle valve on hose from 2" line plugged)				
Recovered: 130' gas cut mud. IFP 47#-71# ISIP 107#				
FFP 95#-95# FSIP 190#				
(MORE)				

Report of all strings set — surface, intermediate, production, etc. CASING RECORD (New) or ~~XXXXX~~

Purpose of string	Size hole drilled	Size casing set (in O.D.)	Weight lbs/ft.	Setting depth	Type cement	Socks	Type and percent additives
Surf. Casing	12 1/4"	8-5/8"	23	575	Halliburton	400	250 Sx Lite 150 Sx Common
Prod. Casing	7-7/8"	4-1/2"	10.5	5049	Buie	200	Class H 10% salt

LINER RECORD

PERFORATION RECORD

Top, ft.	Bottom, ft.	Socks cement	Shots per ft. 4/ft.	Size & type	Depth interval 4792-96'
<b>TUBING RECORD</b>					
Size	Setting depth	Packer set at			
2-3/8" EUE	4809'				

ACID, FRACTURE, SHOT, CEMENT SQUEEZE RECORD

Amount and kind of material used	Depth interval treated
2000 gals 15% mud acid	4792-96'

Date of first production	Producing method (flowing, pumping, gas lift, etc.)	Gravity		
6-27-85				
RATE OF PRODUCTION PER 24 HOURS	Oil	Gas	Water	Gas-oil ratio
	300	MCF	%	CFPB
Duration of gas treated, used on lease or sold:				
Perforations 4792-96'				

PAGE 2 (Side One)

OPERATOR Vincent Oil Corp. LEASE NAME Edmonston  
WELL NO. #1

SEC 31 TWP 29S RGE 18W (W) <sup>xx</sup>

FILL IN WELL INFORMATION AS REQUIRED.

Show all important zones of porosity and contents thereof; cored intervals, and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing & Shut-in pressures, and recoveries.

Show Geological markers, logs run, or Other Descriptive information.

FORMATION DESCRIPTION, CONTENTS, ETC.	TOP	BOTTOM	NAME	DEPTH
DST #3 - 4841-4919. 30, 45, 60, 60. 1" blow building to 6" blow. IFP 56-56# ISIP 124# FFP 56-56# FSIP 181#	1st open	weak 1/2" blow throughout; Recovered 70' gas		2nd open, weak cut mud with show of oil.
DST #4 - 4915-4975. 45, 45, 45, 60. fair blow building to strong. (3% oil, 10% gas, 87% mud); 5% water). IFP 78-78# ISIP 379# FFP 117-117# FSIP 641#	1st open,	weak blow building to strong. Recovered 120' slightly oil and gas cut mud (30% oil, 15% gas, 55% mud,		2nd open, slightly oil and gas cut mud (30% oil, 15% gas, 55% mud,
DST #5 - 4975-4998. 30, 45, 45, 60. blow building to fair blow and gas cut mud (76% mud, 10% water, gas cut mud (60% mud, 12% water, 5% oil, 23% gas)	1st open,	very weak steady blow; decrease to 1" blow. Recovered 65' slightly oil		2nd open, weak slightly oil and
IFP 65-65# ISIP 366# FFP 91-91# FSIP 510#				





October 20, 2015

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

Re: Plugging Application  
API 15-097-20964-00-00  
EDMONSTON 1  
NE/4 Sec.31-29S-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 April 20, 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 April 20, 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 1