



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

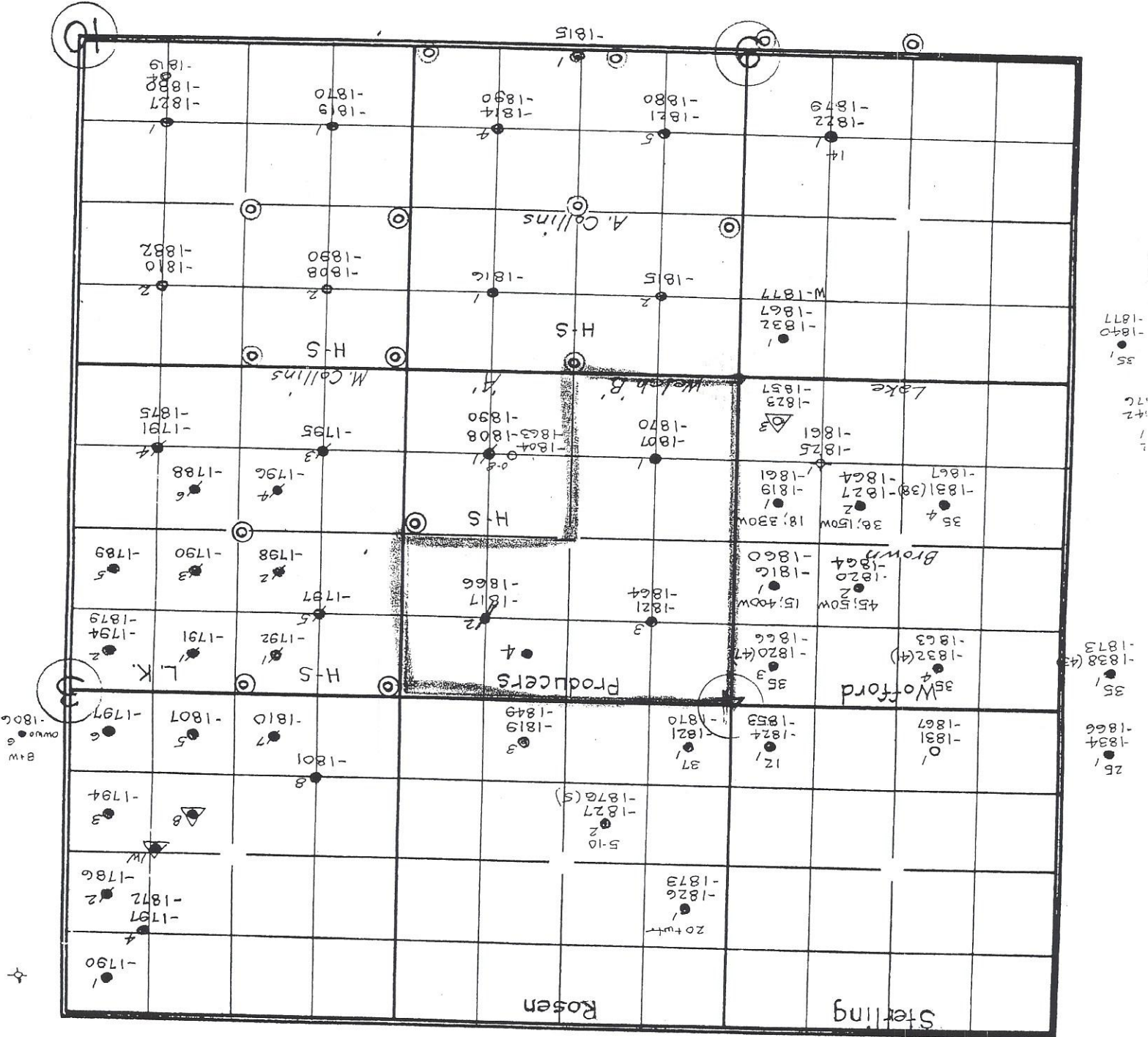
I

Form	CP1 - Well Plugging Application
Operator	S & S Oil and Gas LLC
Well Name	WELCH B 1
Doc ID	1268146

Perforations And Bridge Plug Sets

Perforation Top	Perforation Base	Formation	Bridge Plug Depth
3309	3372	Mississippi	

WELCH LEASE



Form 101-9 Section Memo Plat - In Stock and For Sale by Triangle Blue Print & Supply Co., Tulsa, Okla.

Twp 24^s Range 4^w Reno County, Kans.

4728 N°

UNITED CEMENTING & ACID CO., INC.

SERVICE TICKET

PHONE AC 316-321-4680

EL DORADO, KANSAS 67042

DATE 1-3-54
 CHG. TO: *Anderson D. G.*
 CITY *El Dorado*
 LEASE & WELL NO. *Well # 1-B*
 CONTRACTOR *John Brown Well Serv.*
 KIND OF JOB *1 Cement Plug*
 SERVICE CHARGE: *350.00*

QUANTITY	MATERIAL USED	TYPE	PRICE	TOTAL
8	54 60-40 Pottery	②	4.10	32.80
	54 54	②	8.00	64.00
384	54	②	307.20	11712.00
50	BULK TRK. MILES	(19 trucks x 1.60 x 50 miles)	570.00	570.00
	PUMP TRK. MILES			
	PLUGS	None		
	SALES TAX		167.14	167.14
	TOTAL			12103.94

T. D.	SIZE HOLE	MAX. PRESS.	PLUG DEPTH	PLUG USED	REMARKS
					3200 35 at
					608 35 at
					408 35 at
					350 material in cement

CSG. SET AT _____ VOLUME _____

TBG SET AT _____ VOLUME _____

SIZE PIPE _____

PKR DEPTH _____

TIME FINISHED _____

EQUIPMENT USED _____

NAME _____ UNIT NO. _____

OWNER'S REP. _____

CEMENTER OR TREATER _____

HAVEN BED MIX
 RECEIVED
 transit - mixed concrete
 N 12718

307 W. MAIN
 PHONE (316) 465-7761
 JAN 14 1994
 P.O. BOX 127
 HAVEN, KANSAS 67543

PRODUCERS COMPANIES
 DATE 1-10-94

SOLD TO *Producers Bed Co*
 DELIVER TO *Hotel Form B-1*
 MAILING ADDRESS _____
 TRUCK NO. _____ DRIVER _____
 TOTAL YARDS _____

QUANTITY	MATERIAL	PRICE	AMOUNT
1	CONCRETE	15000	15000
	SAND OR GRAVEL		
	CALCIUM		
	HOT WATER		

DELIVERY CHARGE 20.00
 WAITING AND/OR UNLOADING TIME _____
 EXTRA WATER ADDED _____ GALLONS
 WAITING AND/OR UNLOADING TIME _____

SUB-TOTAL 211.80
 SALES TAX 11.50
 TOTAL 223.30

RECEIPT AND RELEASE
 Thirty Minutes free Time Will Be Allowed For Unloading In Consideration of your making delivery back of the Street Curt Line. I agree to be responsible for all damages done to sidewalks, grounds, or otherwise.
 RECEIVED THE ABOVE MATERIAL IN GOOD CONDITION
 SIGN HERE *[Signature]*

"CAUTION" SKIN AREAS THAT COME INTO CONTACT WITH PORTLAND CEMENT OR MIXTURES CONTAINING PORTLAND CEMENT, EITHER DIRECTLY OR THROUGH SATURATED CLOTHING, SHOULD BE PROMPTLY WASHED WITH WATER, FAILURE TO DO SO MAY CAUSE SKIN IRRITATION OR BURNS. IF ANY PORTLAND CEMENT OR MIXTURES CONTAINING CEMENT GETS IN THE EYE, RINSE IMMEDIATELY AND REPEATEDLY WITH WATER AND GET PROMPT MEDICAL ATTENTION.

PERIODIC RATE OF 1 1/2% PER MONTH FINANCE CHARGE
 WILL BE APPLIED TO PAST DUE ACCOUNTS (18% ANNUAL RATE)

INVOICE AND DELIVERY TICKET

412 Union National Bank Bldg, Wichita, Kas.

JOE DAVIS-SHELL PIERO, CORP.
Woloh No. 1-B

660' SL 660' WL

SFC. 4 T. 24 R. 4W.

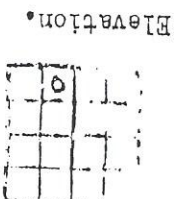
C SW SE

County Reno.

Total Depth. 3372
Comm. 11-9-37 Comp. 1-28-38
Shot or Treated. 2000 gal acid.
Contractor.
Issued. 2-12-38

CASING.

13" 306'
7" 3309'



Figures Indicate Bottom of Formations.
Production Pot. 1147 B.

220 sand

312 shale sticky

480 shale and shells

600 lime and shale

710 gypsum & shale

740 shale and shells

770 shale and lime

875 shale streaks and

lime

975 lime and shale

995 shale and shells

1075 shale and lime

1080 shale

1093 sdy lime

1215 shale and shells

1355 lime and shale

1375 broken lime

1445 shale lime streaks

1475 shale

1690 shale and shells

1730 lime and shale

1780 shale and lime

1805 broken lime

1835 shale and she lls

1885 lime and shale

2036 shale and shells

2115 shale and lime

2150 broken lime

2194 shale and shells

2526 lime and shale

2535 shale

2570 lime

2603 lime and shale

2640 shale

2682 lime

2754 lime shale breaks

2910 lime

2953 lime and shale

2988 lime

3218 shale and lime

3263 shale

3301 shale

3306 equals 3309 Chat SLG

3327 show of gas.

3336 2,340,000 cu ft gas.

3366 first oil 3352

3372 best oil pay 3366-72

Total Depth.

WELL PLUGGING RECORD
 K.A.R.-82-3-117

TYPE OR PRINT
 WELL NUMBER 1-B
 NOTICE: Fill out completely
 and return to COMS. DIV.
 office within 30 days.

API NUMBER None
 LEASE NAME Welch
 WELL NUMBER 1-B

660 Ft. from S section line
 4620 Ft. from E section line
 PRODUCERS OIL COMPANY
 427 S. Boston Ste. 711 Tulsa, OK 74103
 COUNTY Reno

ONE# (918) 582-1188 OPERATORS LICENSE NO. 5232
 DATE WELL COMPLETED 1-28-38
 CHARACTER OF WELL OIL
 PUGGING COMMENCED 12-30-93
 PUGGING COMPLETED 1-10-94
 A PUGGING PROPOSAL WAS APPROVED ON September 1, 1992 (date)
 David E. Williams (KCC District Agent's Name).
 ACO-1 filled? NO If not, is well log attached? NO
 PRODUCING FORMATION Miss Chat
 Depth to Top 3309 Bottom 3375 T.O. 3375
 Depth and thickness of all water, oil and gas formations.
 OIL, GAS OR WATER RECORDS CASING RECORD

FORMATION	CONTENT	FROM	TO	SIZE	PUT IN	PULLED OUT
Miss Chat	Gas, Oil, Water	3309	3375	1 1/2"	306	0

Describe in detail the manner in which the well was plugged, indicating where the mud fluid was used and the method or methods used in introducing it into the hole. If cement or other plug material, hit bridge @ 1600ft. Ran tbg. to 3200 ft., spotted 30 sx cement. Pulled tbg. set in battery, hit bridge @ 600ft. Ran tbg. to 600 ft., spotted 35 sx cement. Pulled tbg to 400ft. Circulated cement from 400 ft to surface. Pulled tbg. Ran 1" to 350; outside casing: circulated cement surface - one week later filled casing to surface w/ redi-mix cement.

Name of Plugging Contractor Sunflower Well Service License No. 30280
 Address P.O. Box 341 Canton, KS 67428
 NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Producers Oil Company
 STATE OF Oklahoma COUNTY OF Tulsa, ss.

Richard N. Knoblock (Employee of Operator or Operator)
 Being first duly sworn on oath, says: That I have knowledge of the facts and matters herein contained and the log of the above-described well as filed the same are true and correct, so help me God.
 (Signature) Richard N. Knoblock
 (Address) 427 S. Boston Ste/ 711 Tulsa, OK 74103

SUBSCRIBED AND SWORN TO before me this 25th day of January, 1994
 Notary Public

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

October 21, 2015

Shane Downing
S & S Oil and Gas LLC
PO BOX 659
SKIATOOK, OK 74070

Re: Plugging Application
API 15-155-02904-00-01
WELCH B 1
SE/4 Sec.04-24S-04W
Reno County, Kansas

Dear Shane Downing:

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 April 21, 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 21, 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