



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	SandRidge Exploration and Production LLC
Well Name	Gabriel 3305 1-36H
Doc ID	1272010

Perforations And Bridge Plug Sets

Perforation Top	Perforation Base	Formation	Bridge Plug Depth
4963	5100	Mississippi	
5334	9165	Mississippi	

P&A procedure for the Gabriel 3406 1-23H

1. MIRU.
2. Pull tubing and bottom hole assembly. (NA)
3. Set 7" cast iron bridge plug at ~ 4900' (Top perf @4963')
4. Perform MIT.
5. Spot xx amount of sacks of cement on top of cast iron bridge plug.
6. Reverse hole clean with freshwater. Circulate with plugging mud. POOH.
7. Pull stretch on 7" casing, determine freepoint and cut casing at collar above freepoint.
8. TIH with workstring and SN and spot the following cement plugs:
 - A. XX sacks at xxx depth
 - B. Xx sacks at xxx depth
 - C. Xx sacks at xxx depth
9. Cut casing 4' below the surface. Weld top plate on top of surface casing with weephole.
10. Clean and restore location.



Field Gerberding
 County Harper
 State KS
 Well GABRIEL 3305 1-36H
 SH Location SEC 36, TWP 33S, RNG 31W
 Elevations 1267' NB; 1251' GL

Wellbore Schematic

15-077-2/1979
 API No.

Current

Well Bore Data MD TVD

13.1% 9.516" 36# 1.56 csg @ 550'
 36# J-56; CPB OD = 10.025" ID=8.927" Drift=8.795" Collapse= 2020 Internal Yield=3520
 Conid w/ 150 xss Hal Lin @ 12.4 HPG (Yield=2.1), followed by 150 xss
 SH @ 15.6 HPG (Yield=1.2)

12-1/4" Hole
 MW: 9.2299

TOC T @
 2093.4394
 calculated
 484.3 total #13
 6.652 compression
 3221.5584 linear ft of cont coverage behind 7"
 9.346" Hole
 MW: 8.9959

head	tail
170 xss	190 xss
1.53 yield	1.19 yield

5.787" Hole
 MW: Clear water
 TD: 926' MD / 459' TVD

Target from 4532 to 5164
 Top of Liner 66.2' Inclination
 Baker S-3 Liner Top Packer w/ 25H Anchor Profile and 6" Extension (Min ID: 3.87")

1.26 lb 7" 29# P.110 99# @ 5.295'
 29# P.110 CPB OD = 7.665" ID=6.226" Drift=6.151" Collapse= 6210 Internal Yield=9960
 Conid w/ 170 xss TOC 50950 mixed at 13.6 HPG (Yield= 1.50), followed by 150 xss Class A @ 15.6 (Yield=1.18), FR
 SH @ 90.1'

PBTD @ 9.254' 4.597'

98.1# 4.1/2" 11.6# N-80 55# @ 9.264'
 11.6# N-80 CPB OD = 5.007" ID=4.007" Drift=3.875" Collapse= 6330 Internal Yield=7790
 Liner w/ P-Sleeve, 10 open hole packers and S-3 Liner top.

Completion ()
 Current X
 Workover
 Proposed

cut: 11/11/2013

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

November 20, 2015

Wanda Ledbetter
SandRidge Exploration and Production LLC
123 ROBERT S. KERR AVE
OKLAHOMA CITY, OK 73102-6406

Re: Plugging Application
API 15-077-21979-01-00
Gabriel 3305 1-36H
SE/4 Sec.36-33S-05W
Harper County, Kansas

Dear Wanda Ledbetter:

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 May 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 May 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 2