



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

Form	CP1 - Well Plugging Application
Operator	Steinforth, Loren
Well Name	ASHLEY(STEINFORTH) 10
Doc ID	1280613

Perforations And Bridge Plug Sets

Perforation Top	Perforation Base	Formation	Bridge Plug Depth
0	1	na	



**COMPENSATED DENSITY
SIDEWALL NEUTRON LOG**

Company COLT ENERGY INC.		Company COLT ENERGY INC.	
Well ASHLEY # 10		Well ASHLEY # 10	
Field		Field	
County WOODSON		County WOODSON	
State KANSAS		State KANSAS	
Location:		AP1 #: 15-207-29321-0000	
Permanent Datum		NW/4	
Log Measured From		4785' FSL & 3465' FEL	
Drilling Measured From		SEC 13 TWP 26S RGE 14E	
Elevation 1034'		Other Services	
K.B. ---		DIL	
D.F. ---		Elevation	
G.L. 1034'		Elevation 1034'	
Date	1-22-2016		
Run Number	ONE		
Depth Driller	1566'		
Depth Logger	1559'		
Bottom Logged Interval	1557'		
Top Log Interval	SURFACE		
Casing Driller	8.625" @ 40.50'		
Casing Logger	8.625" @ 40.50'		
Bit Size	6.75"		
Type Fluid in Hole	WATER		
Density / Viscosity			
pH / Fluid Loss			
Source of Sample			
Rm @ Meas. Temp			
Rmf @ Meas. Temp			
Rmc @ Meas. Temp			
Source of Rmf / Rmc			
Rm @ BHT			
Time Circulation Stopped			
Time Logger on Bottom			
Maximum Recorded Temperature			
Equipment Number	OW2		
Location	HOMINY, OK		
Recorded By	LOWERY		
Witnessed By	MS. BALLARD		

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All interpretations are opinions based on inferences from electrical or other measurements and we cannot and do not guarantee the accuracy or correctness of any interpretation, and we shall not, except in the case of gross or willful negligence on our part, be liable or responsible for any loss, costs, damages, or expenses incurred or sustained by anyone resulting from any interpretation made by any of our officers, agents or employees. These interpretations are also subject to our general terms and conditions set out in our current Price Schedule.

Comments

OW2-8902
 MATRIX LIMESTON 2.71 G/CC
 ABHV COMPUTED WITH 4 1/2 CASING

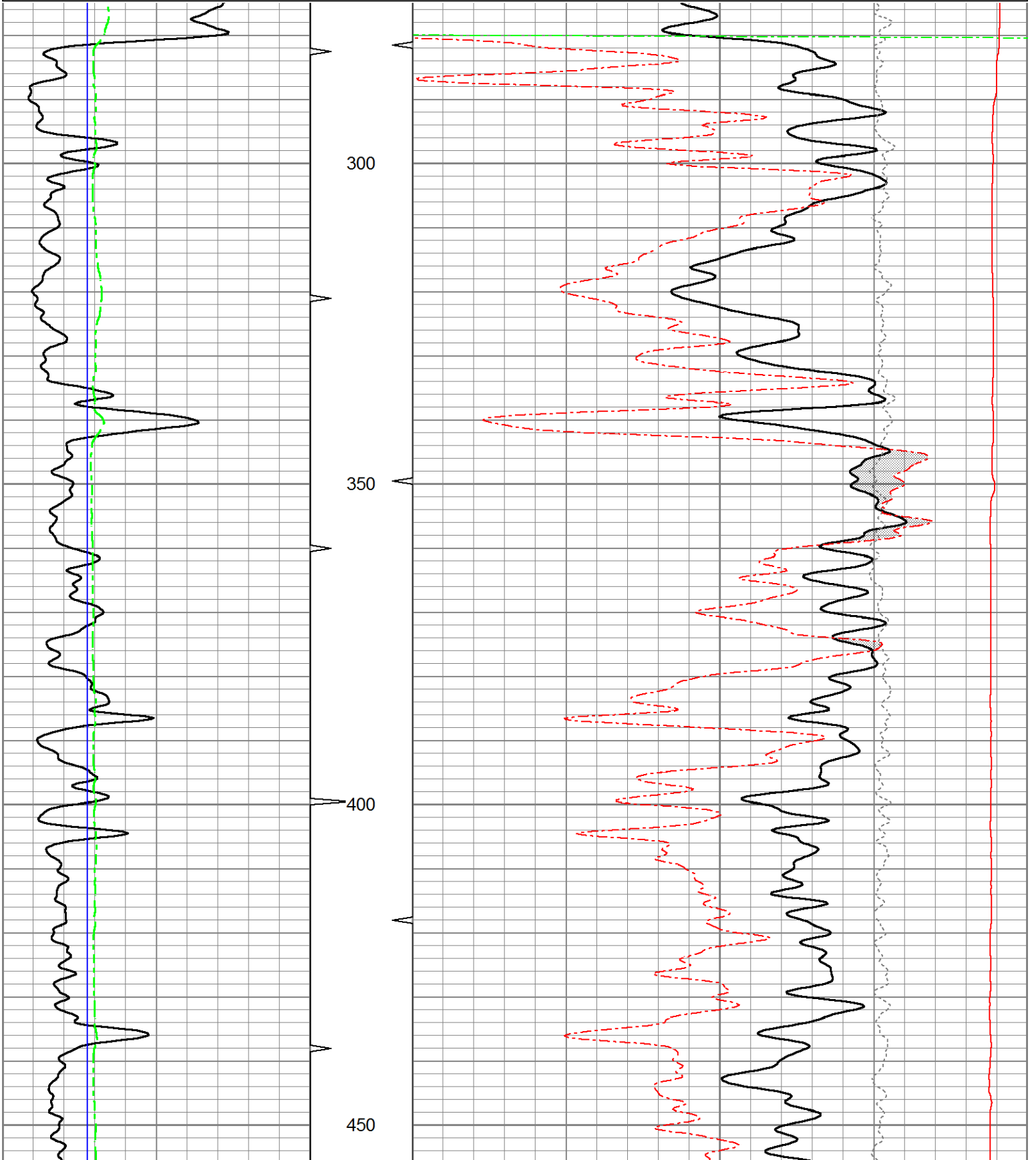
 CREW : M. KIDD

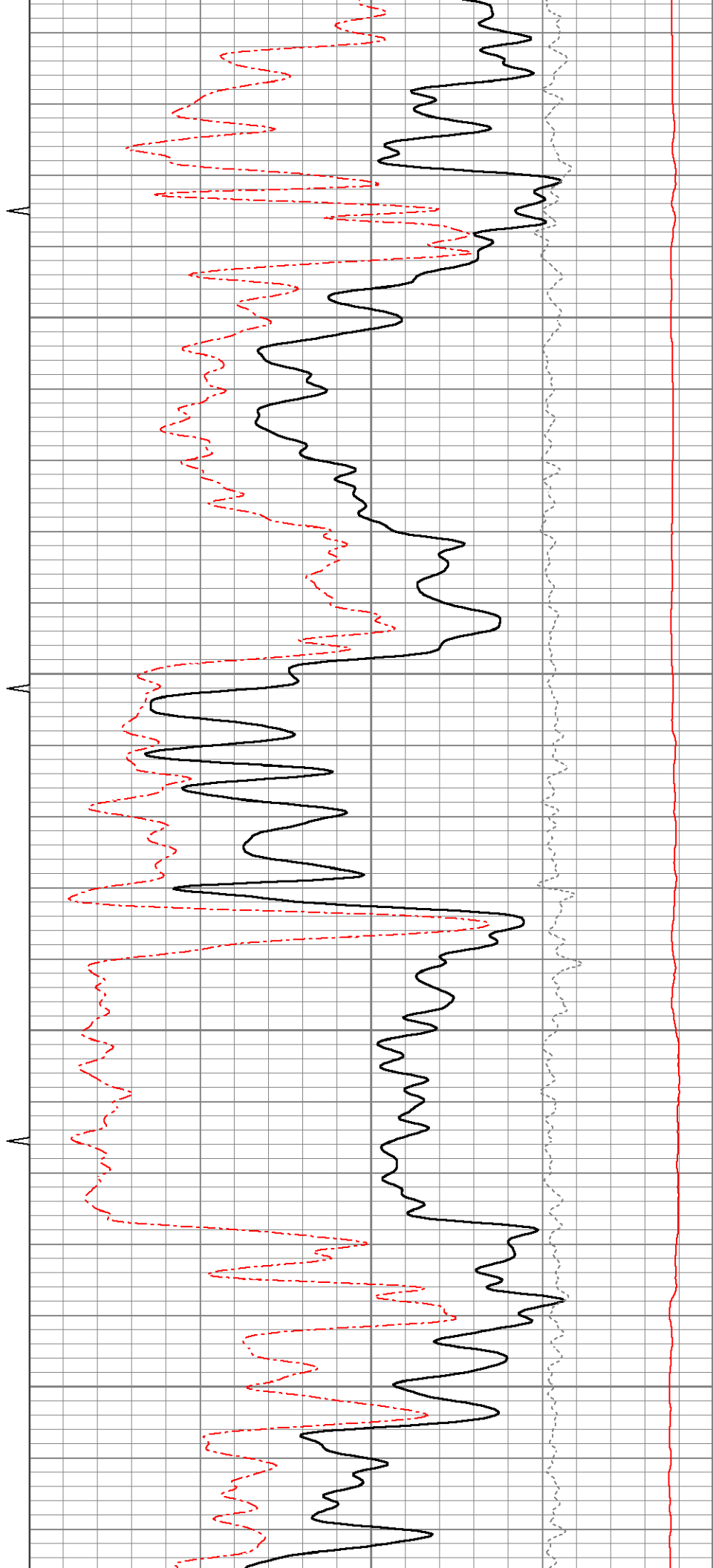
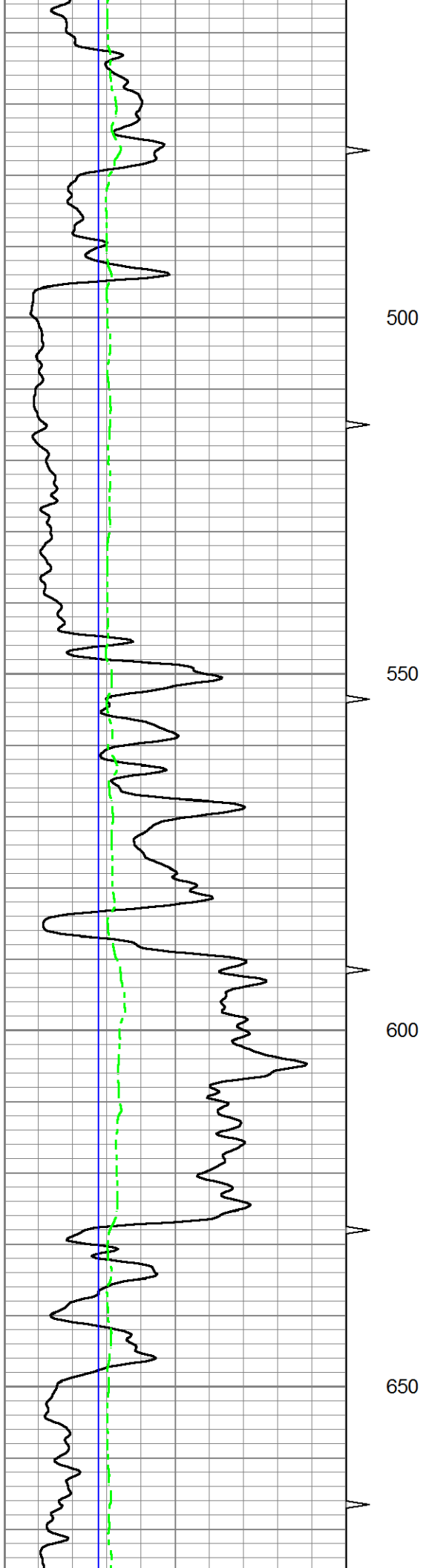


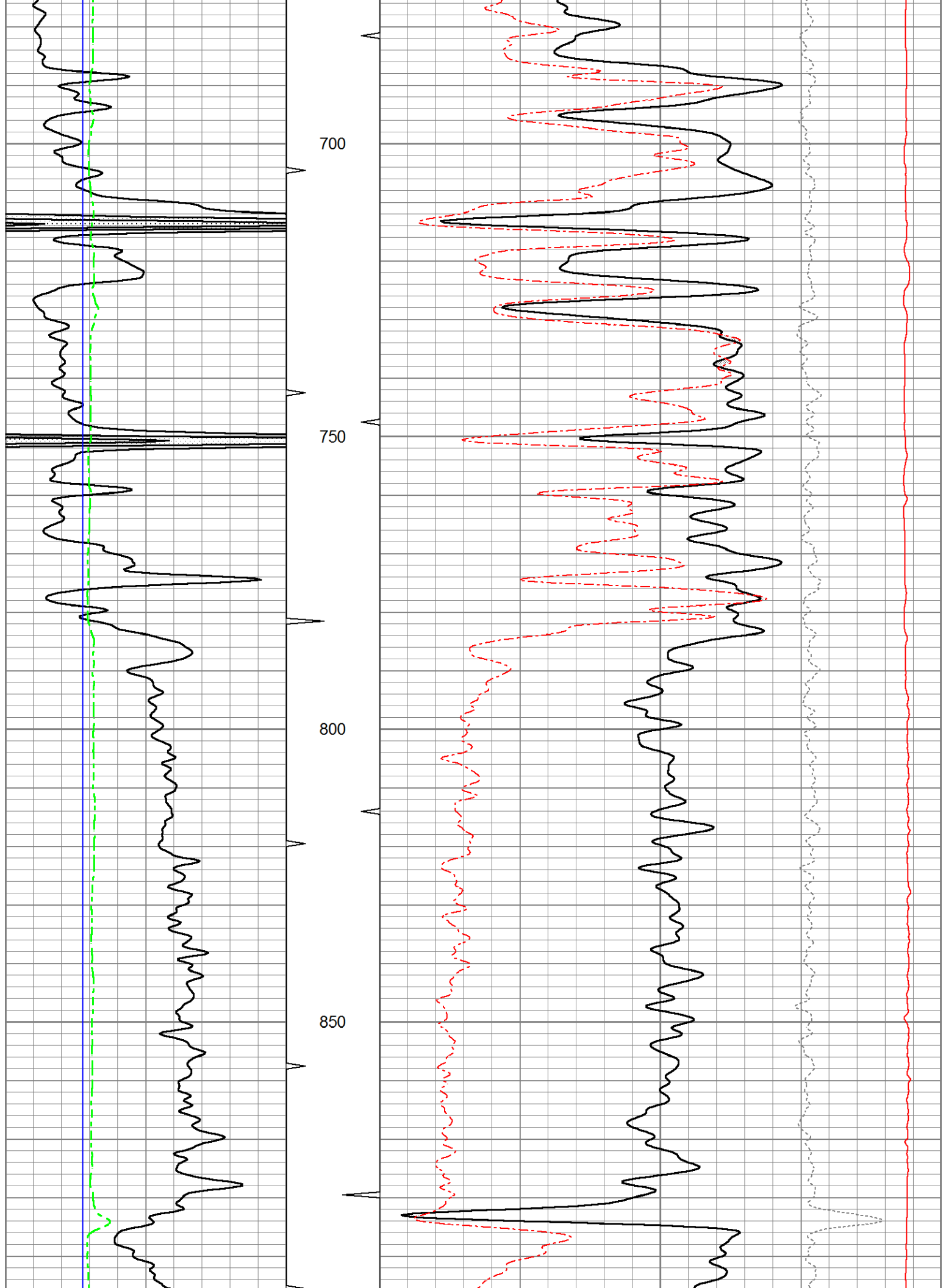
5" CDL/SWN SECTION

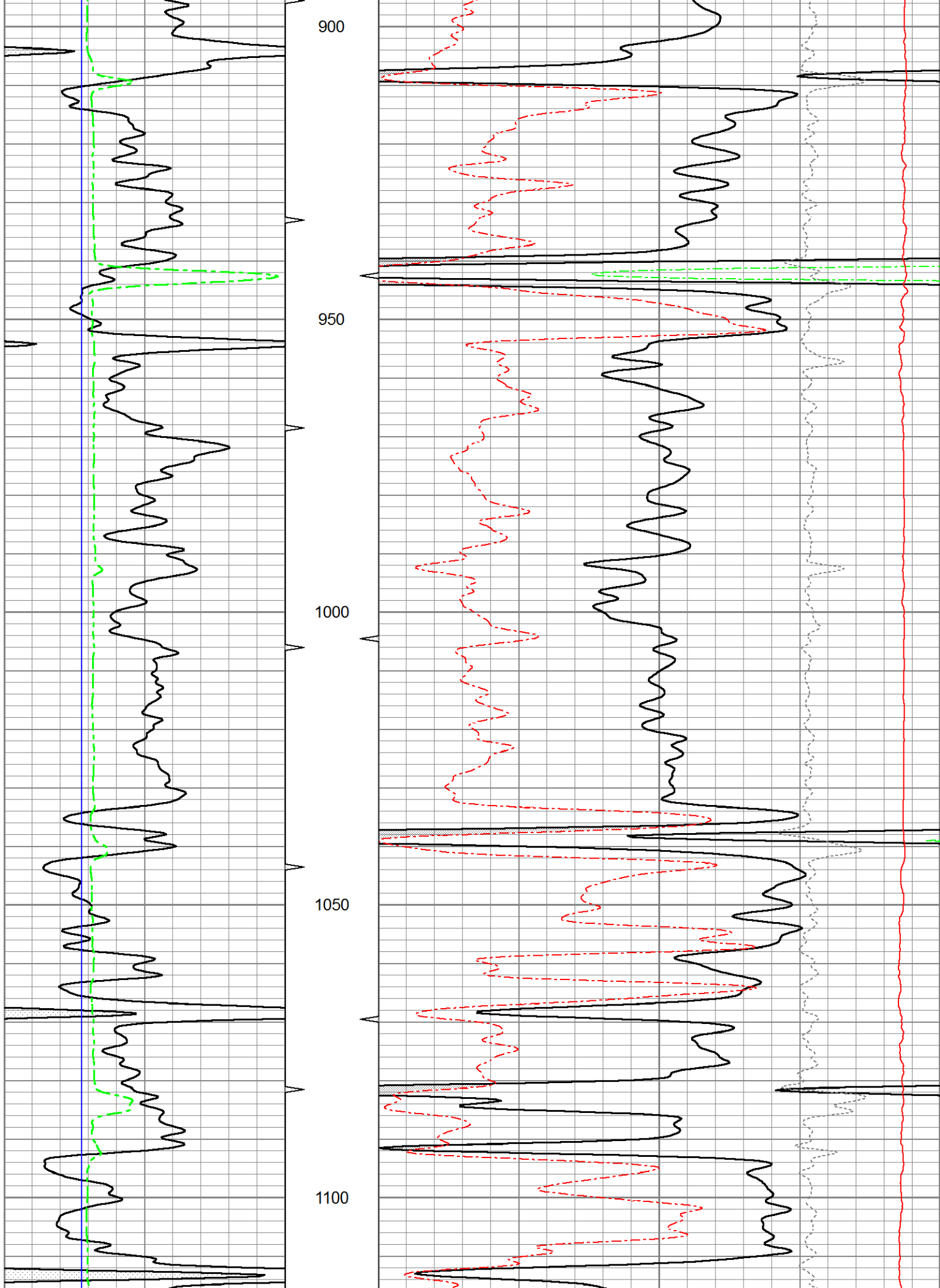
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 Dataset Creation Fri Jan 22 15:10:01 2016
 Charted by Depth in Feet scaled 1:240

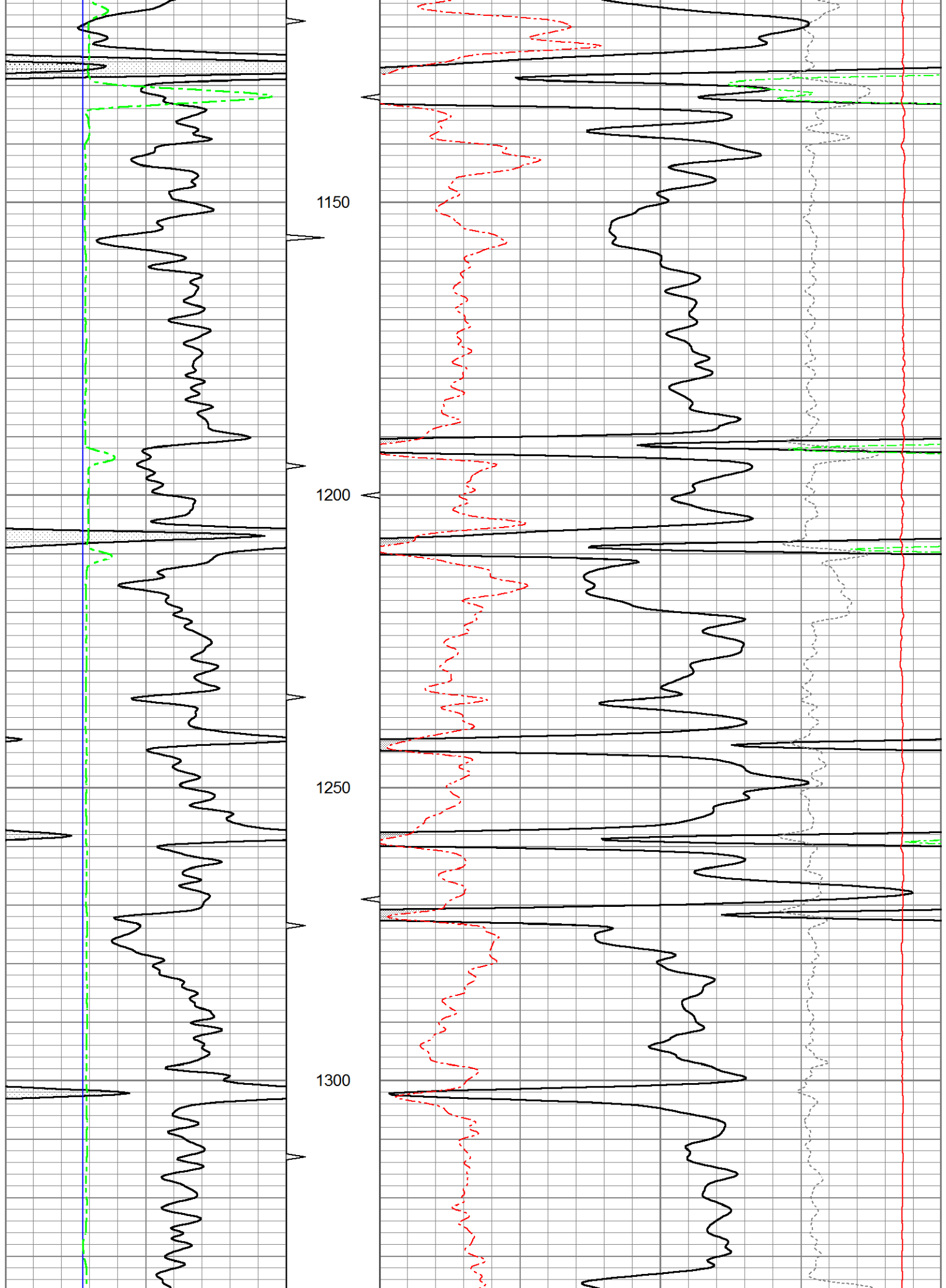
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4	Bit size (in)	14	ABHV	30	Neutron Porosity (pu)	-10
4	Neutron Caliper (in)	14			-0.5	Correction (g/cc) 0.5
					5000	Line Tension (lb) 0

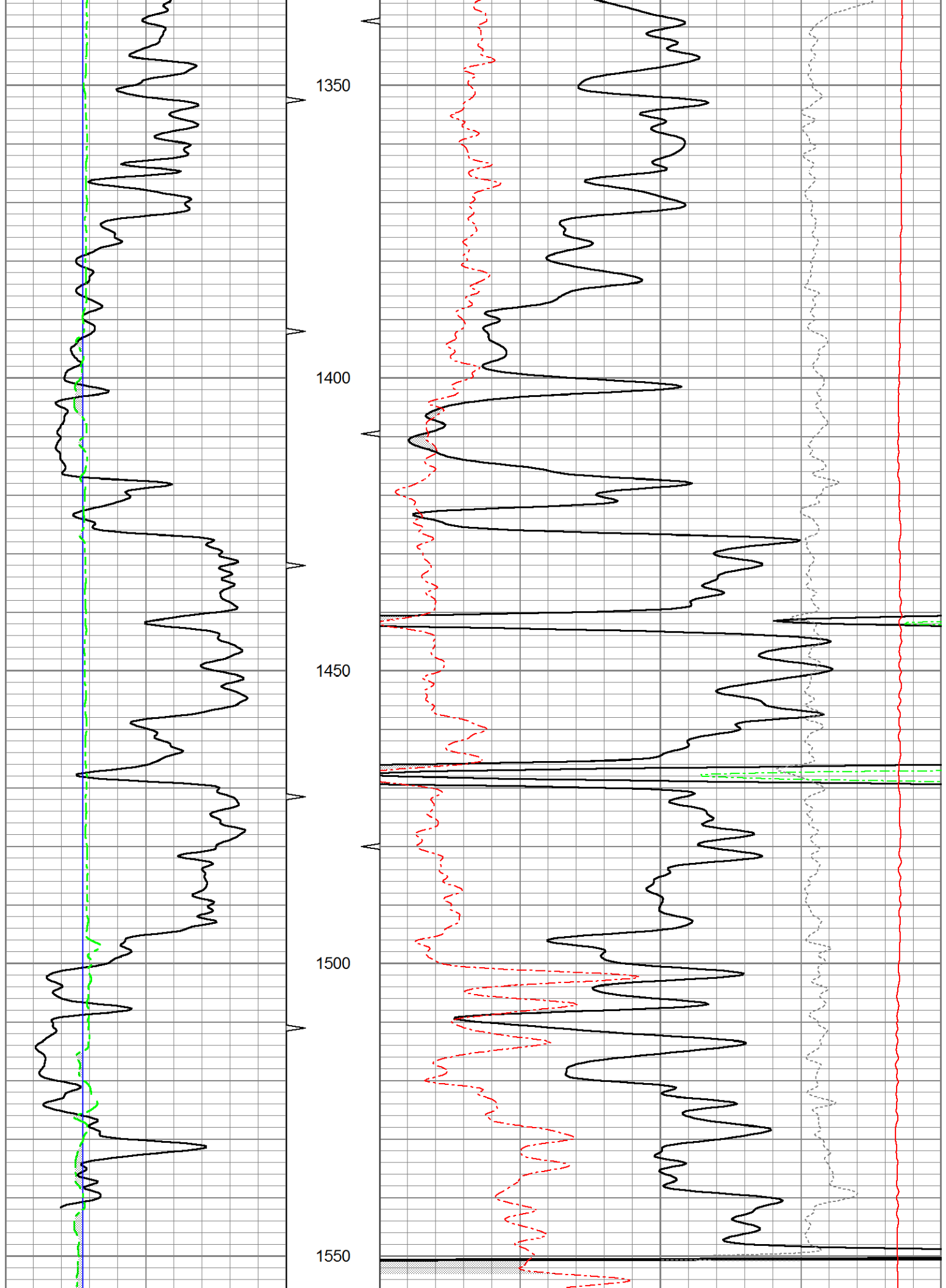












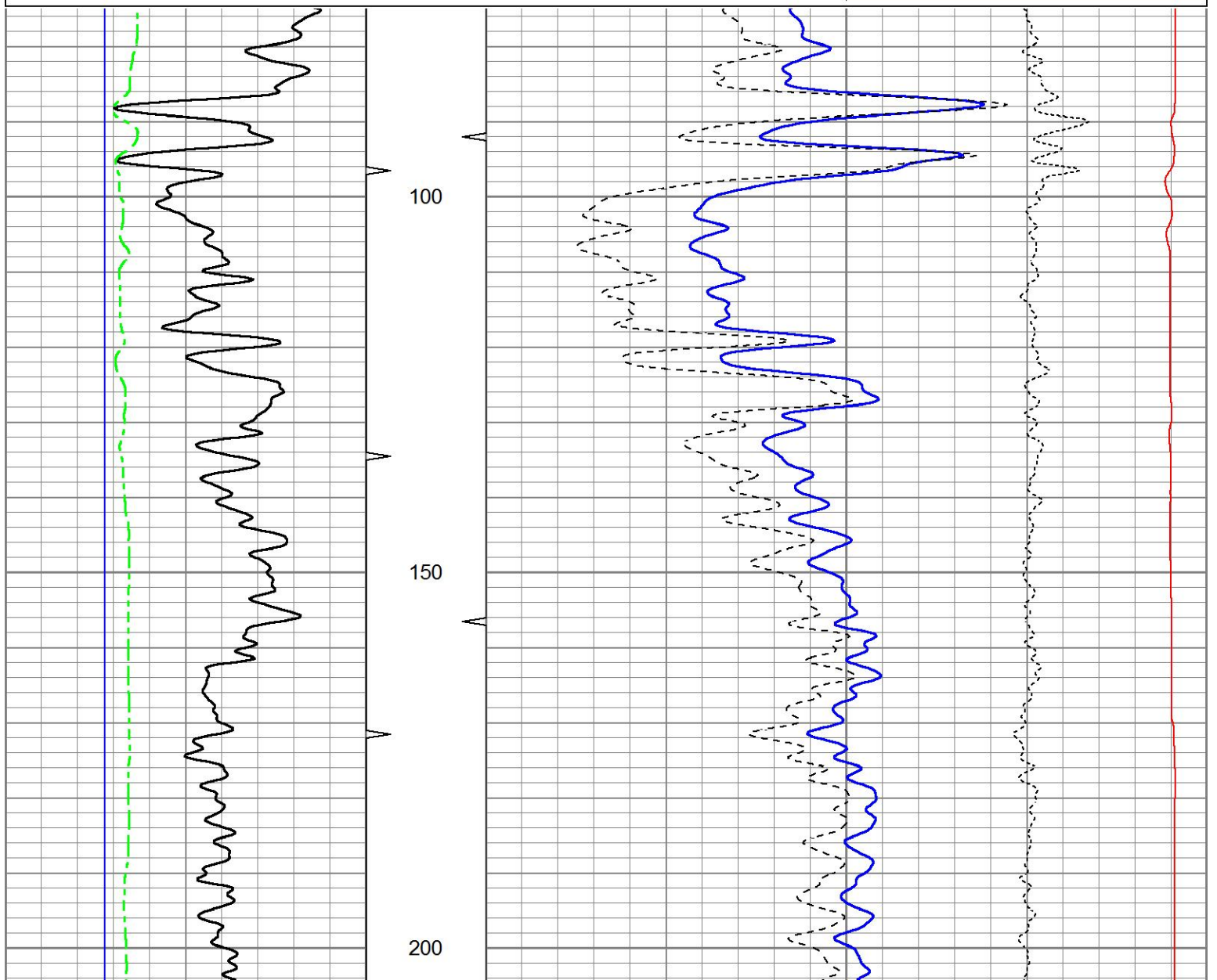
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4	Bit size (in)	14	ABHV	30	Neutron Porosity (pu)	-10
4	Neutron Caliper (in)	14			-0.5	Correction (g/cc) 0.5
					5000	Line Tension (lb) 0

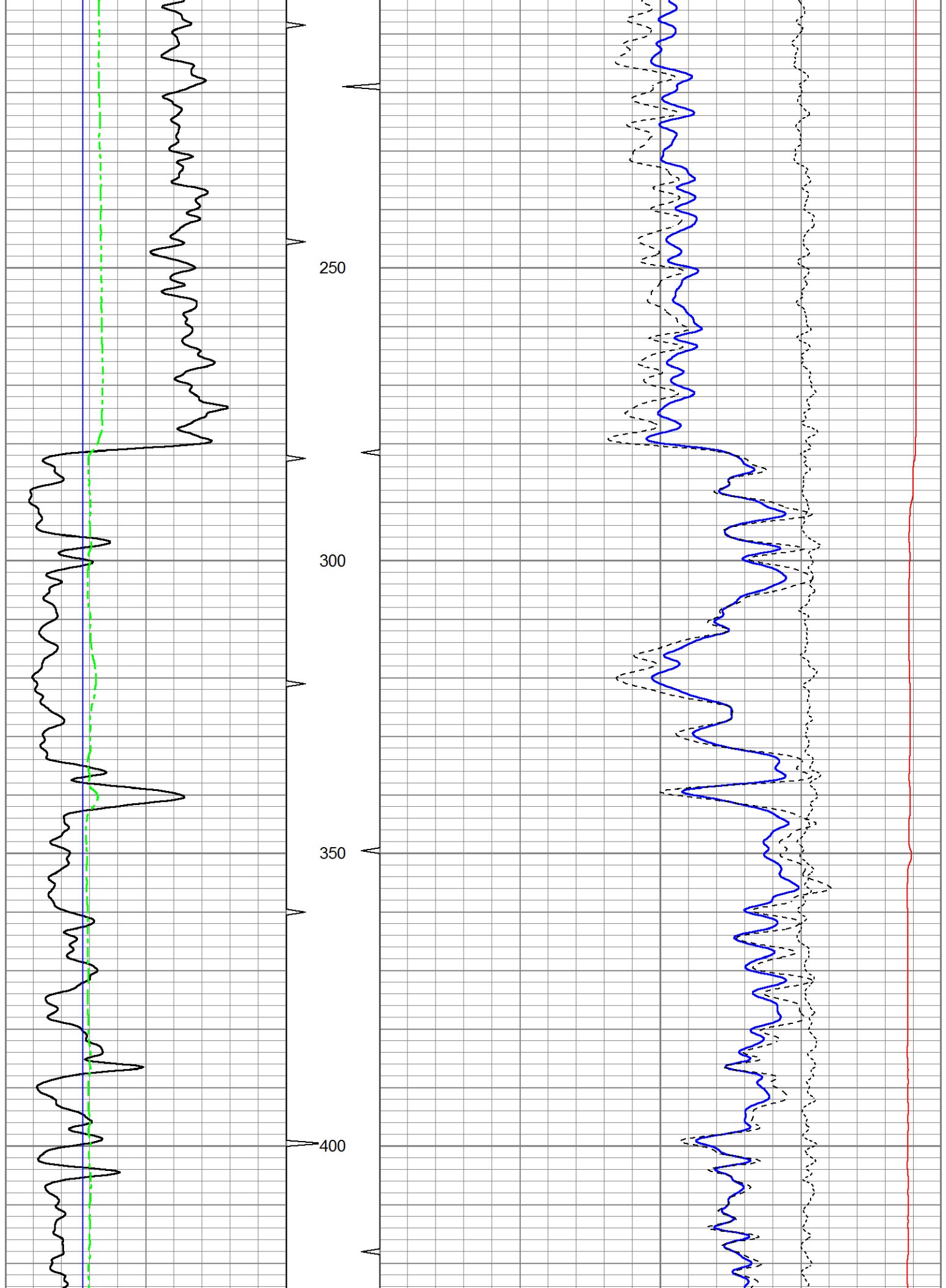


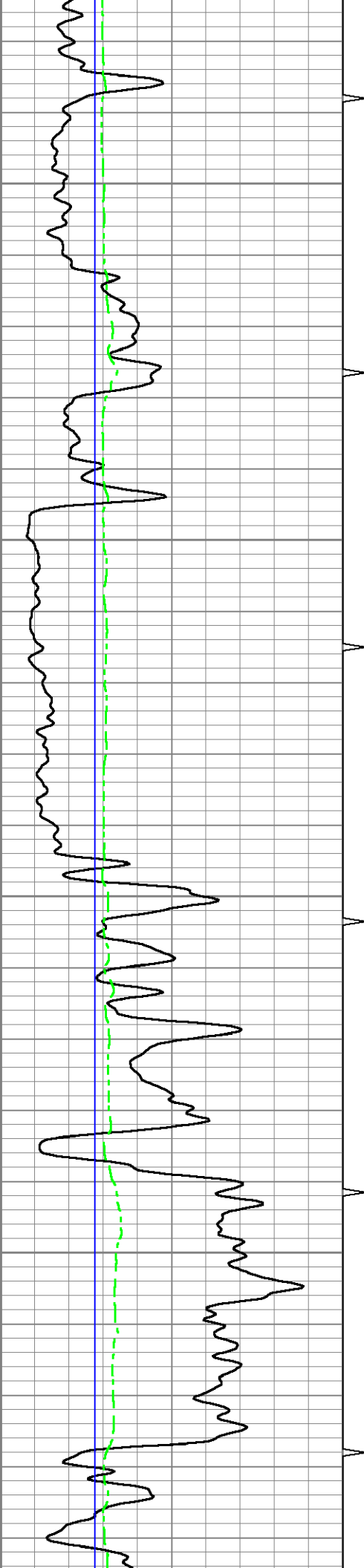
5" CDL SECTION

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 Charted by Depth in Feet scaled 1:240

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4	Bit size (in)	14	ABHV	30	Density porosity (pu)	-10
4	Neutron Caliper (in)	14			-0.5	Correction (g/cc) 0.5
					5000	Line Tension (lb) 0





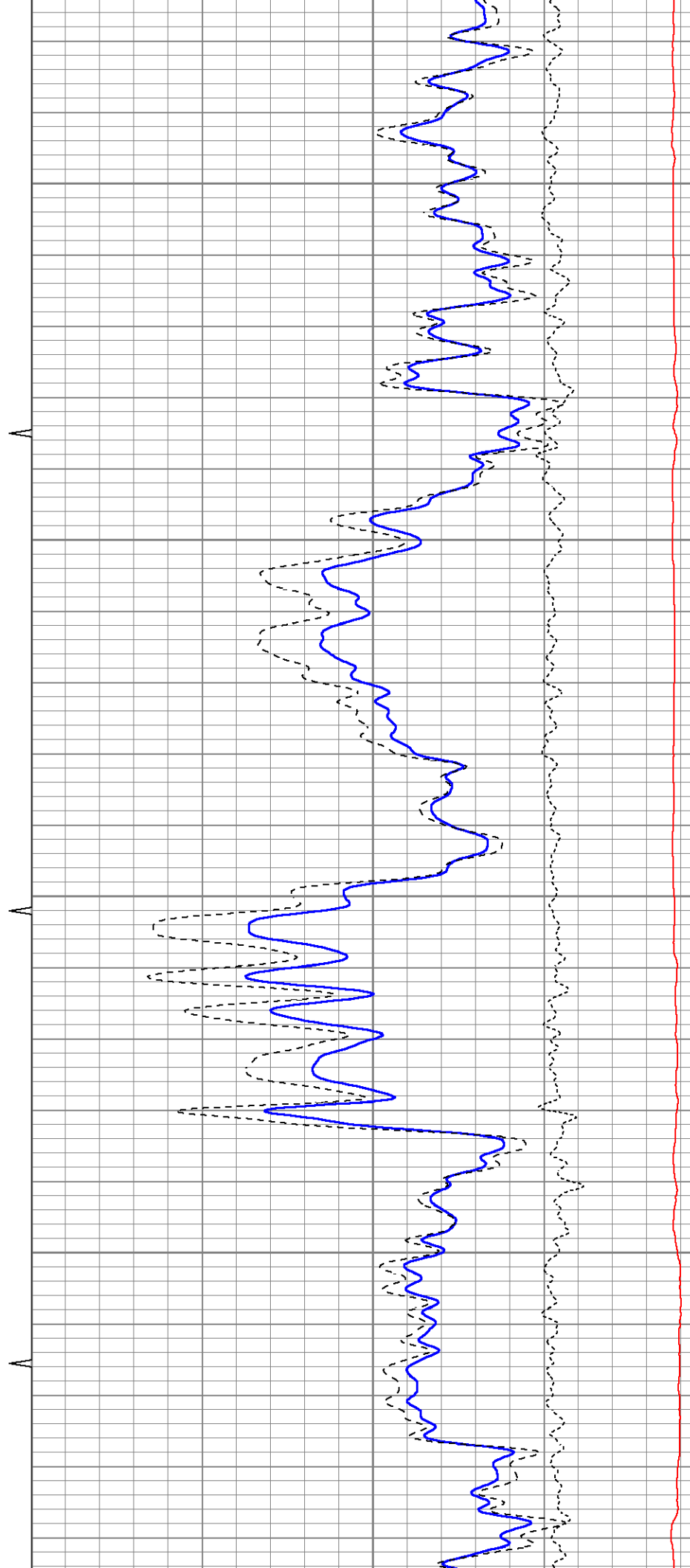


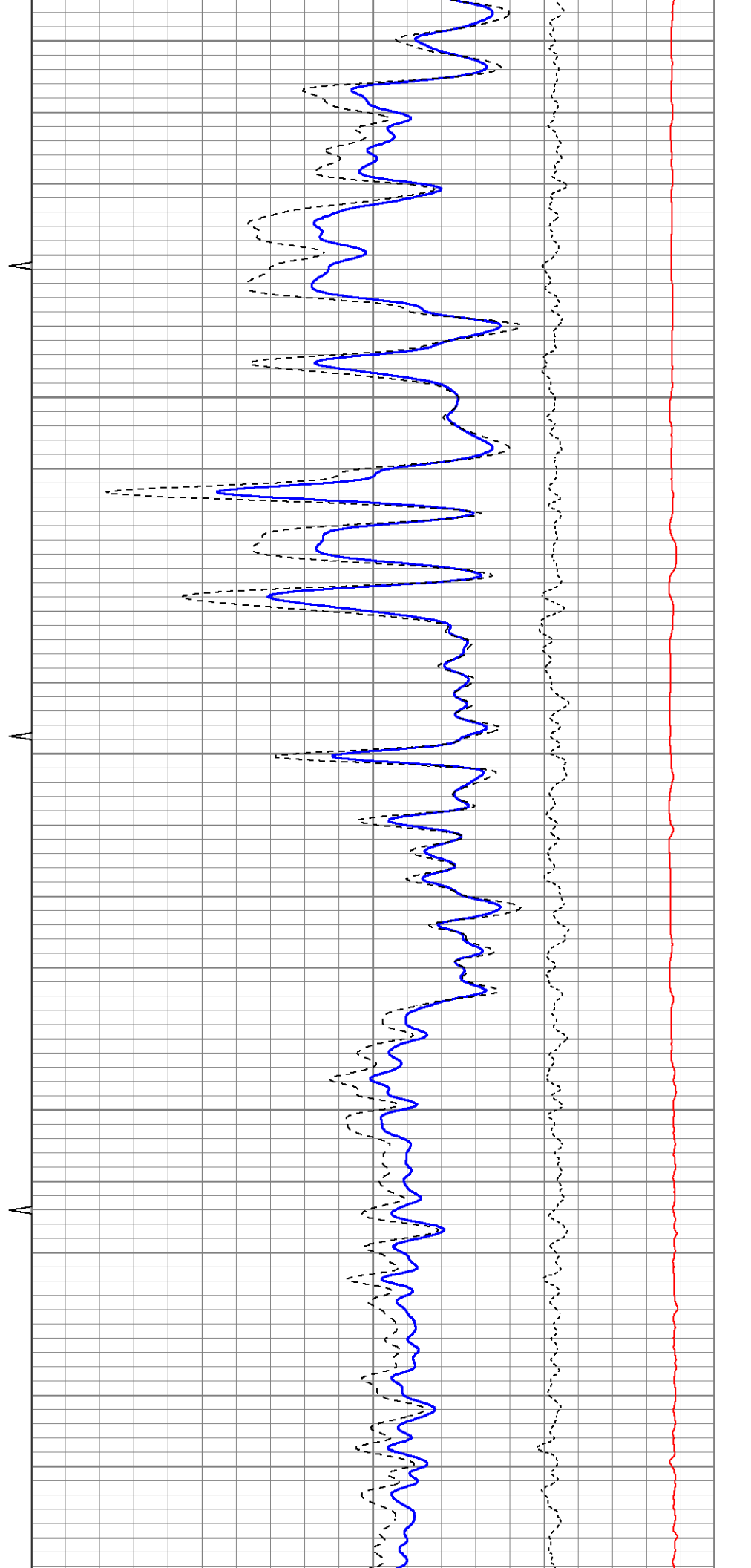
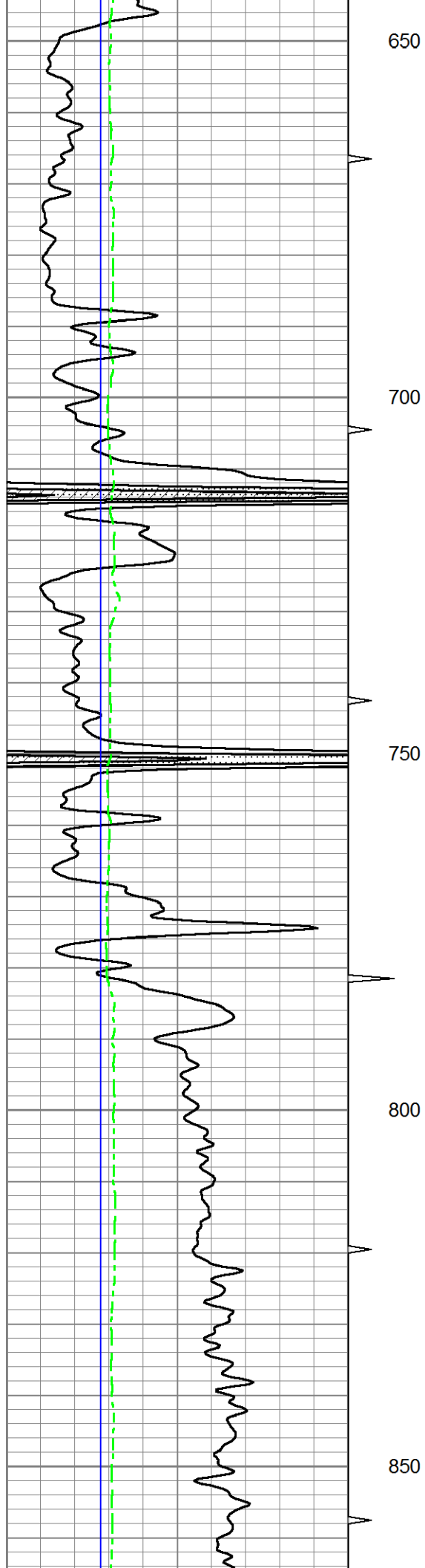
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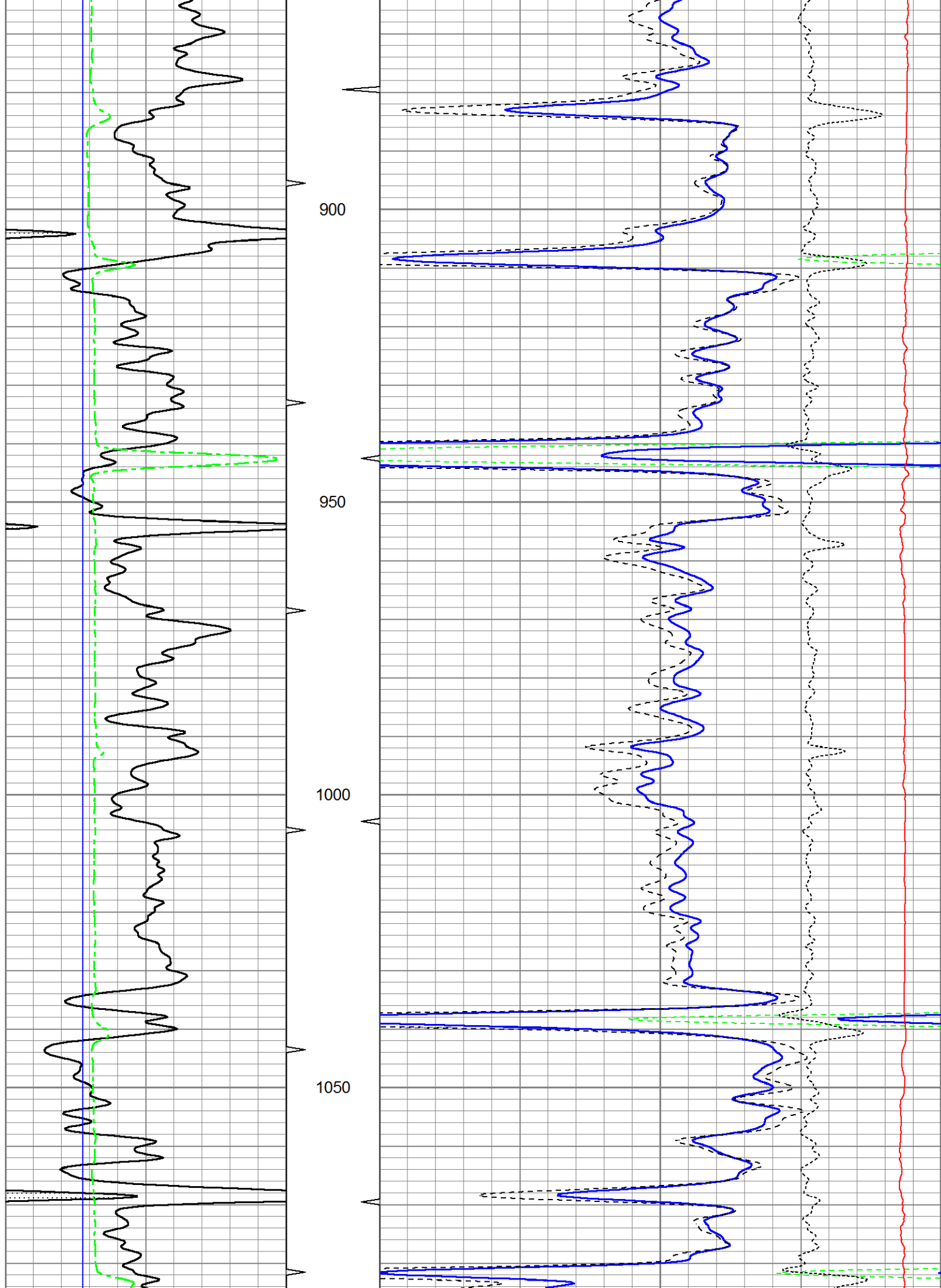
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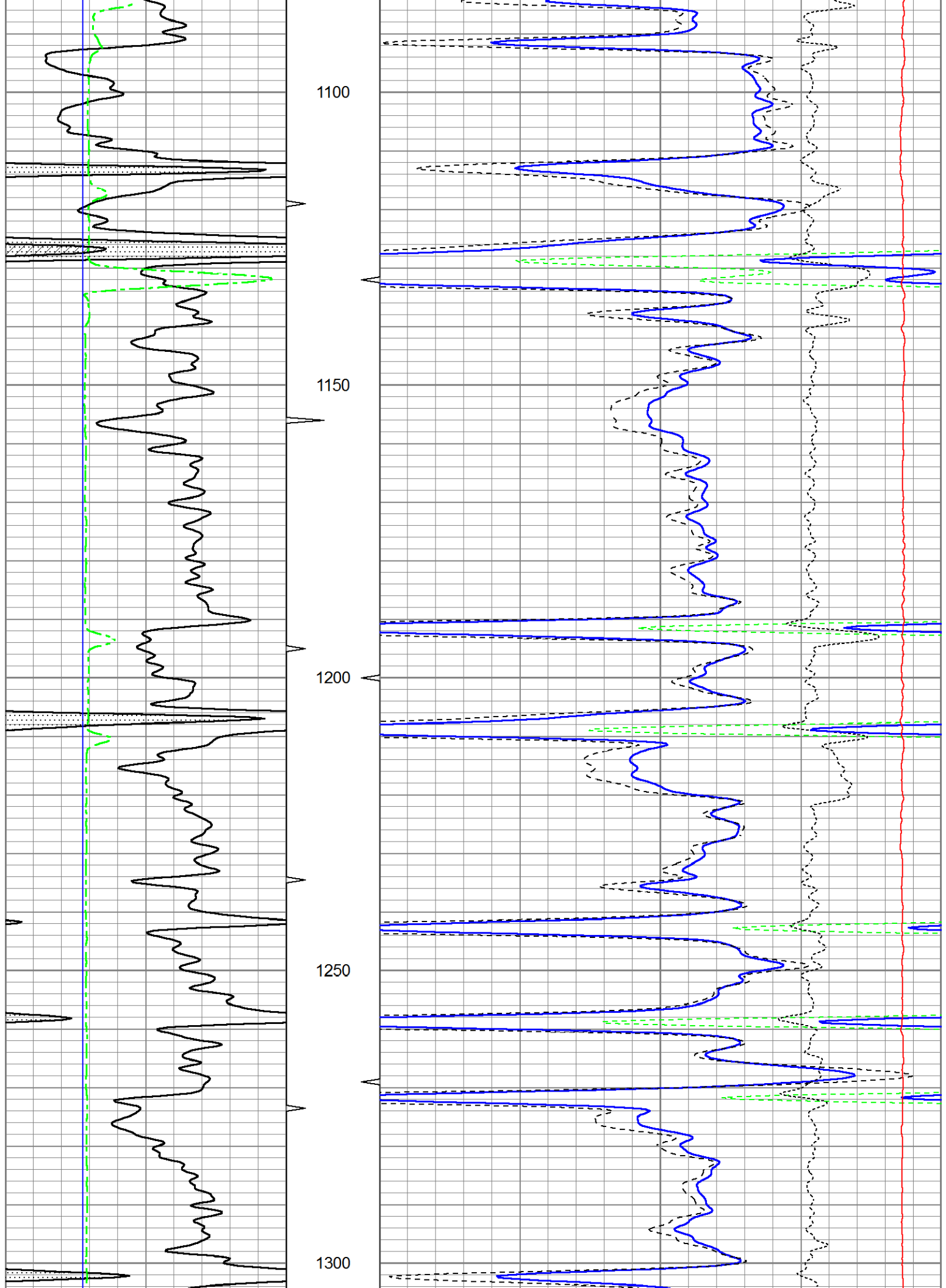
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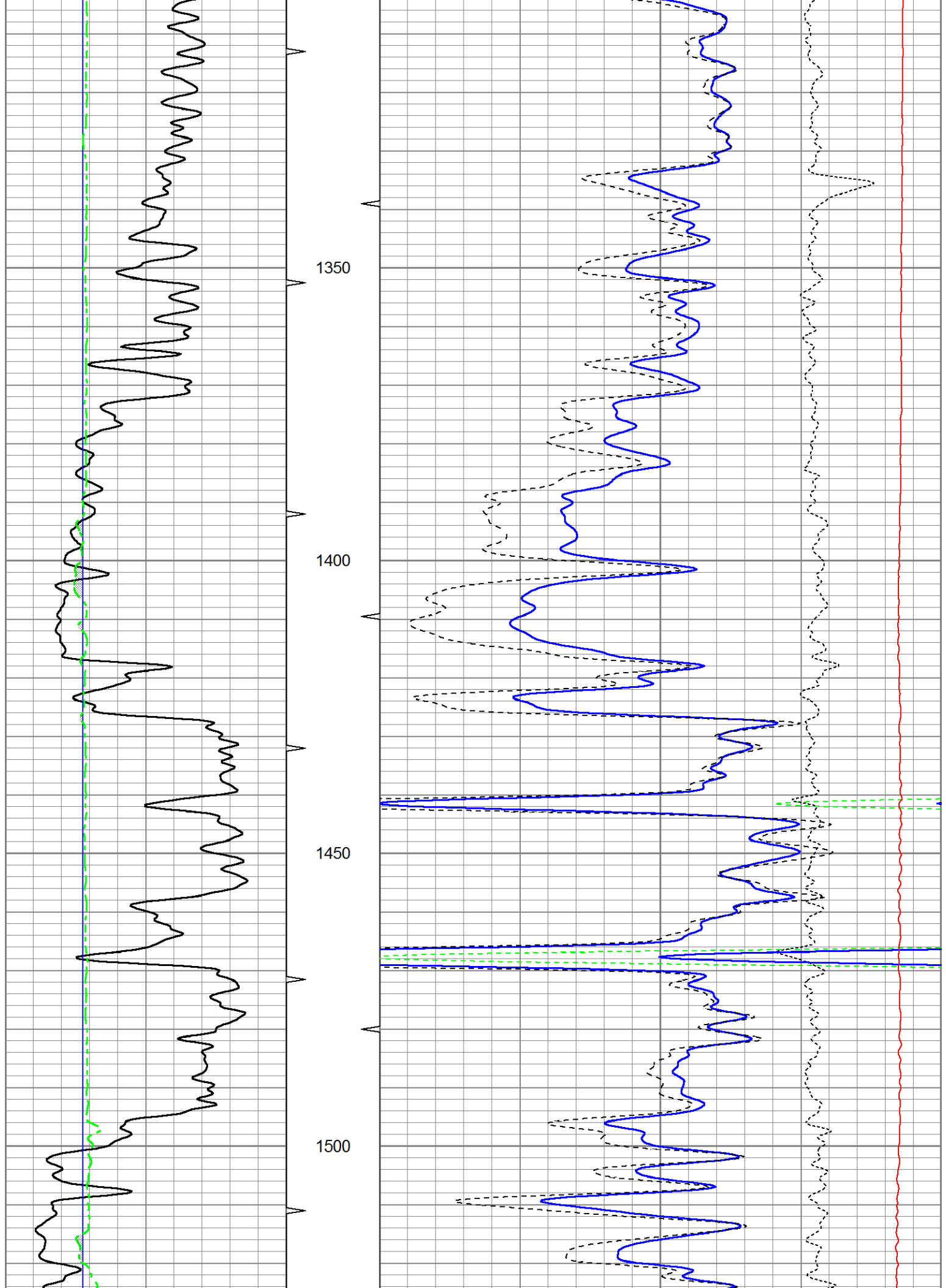
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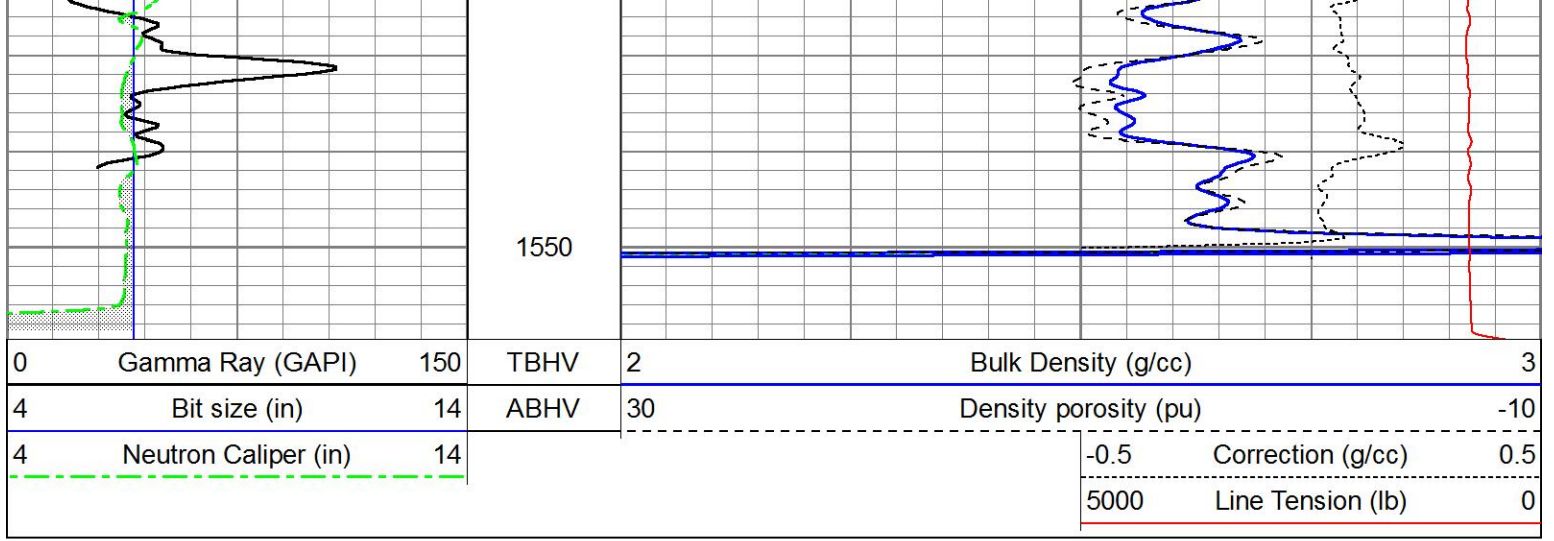












Sensor	Offset (ft)	Schematic	Description	Length (ft)	O.D. (in)	Weight (lb)
GR	15.60		Cable-CableHead Isulation Sub	1.42	3.00	20.00
			Gamma-Oilex2122 (2122) Gamma Ray Section	2.83	3.50	75.00
LSD DCAL SSD	10.22 9.94 9.76		Density-Oilex2122 (2122) Density Section	6.08	4.00	250.00
			Neutron-Sidewall3015 (3015) Sidewall Neutron Section	7.81	4.00	150.00

Dataset: ow2-8902 colt energy.db: field/well/CDL/pass1
 Total length: 18.15 ft
 Total weight: 495.00 lb
 O.D.: 4.00 in



DUAL INDUCTION
LL3/GR LOG

Company COLT ENERGY INC.
 Well ASHLEY # 10
 Field
 County WOODSON State KANSAS

Location: API #: 15-207-29321-0000
 NW/4
 4785' FSL & 3465' FEL
 SEC 13 TWP 26S RGE 14E
 Permanent Datum GL Elevation 1034'
 Log Measured From GL
 Drilling Measured From GL
 Other Services CDL/SWN
 Elevation K.B. ---
 D.F. ---
 G.L. 1034'

Date	1-22-2016
Run Number	ONE
Depth Driller	1566'
Depth Logger	1559'
Bottom Logged Interval	1557'
Top Log Interval	SURFACE
Casing Driller	8.625" @ 40.50'
Casing Logger	8.625" @ 40.50'
Bit Size	6.75"
Type Fluid in Hole	WATER
Density / Viscosity	
pH / Fluid Loss	
Source of Sample	
Rm @ Meas. Temp	
Rmf @ Meas. Temp	
Rmc @ Meas. Temp	
Source of Rmf / Rmc	
Rm @ BHT	
Time Circulation Stopped	
Time Logger on Bottom	
Maximum Recorded Temperature	
Equipment Number	OW2
Location	HOMINY, OK
Recorded By	LOWERY
Witnessed By	MS. BALLARD

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Comments

OW2-8902
CREW : M. KIDD

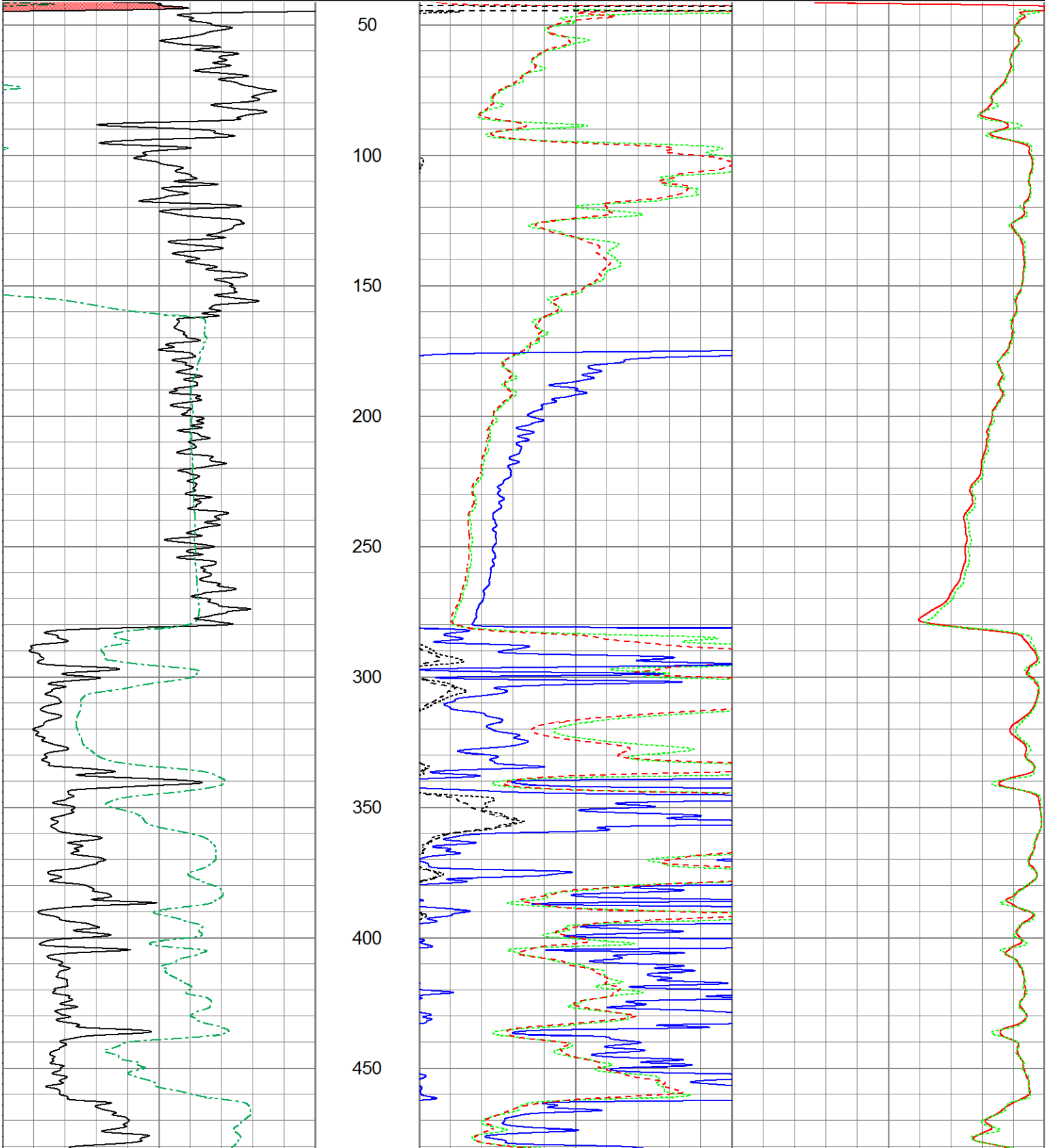


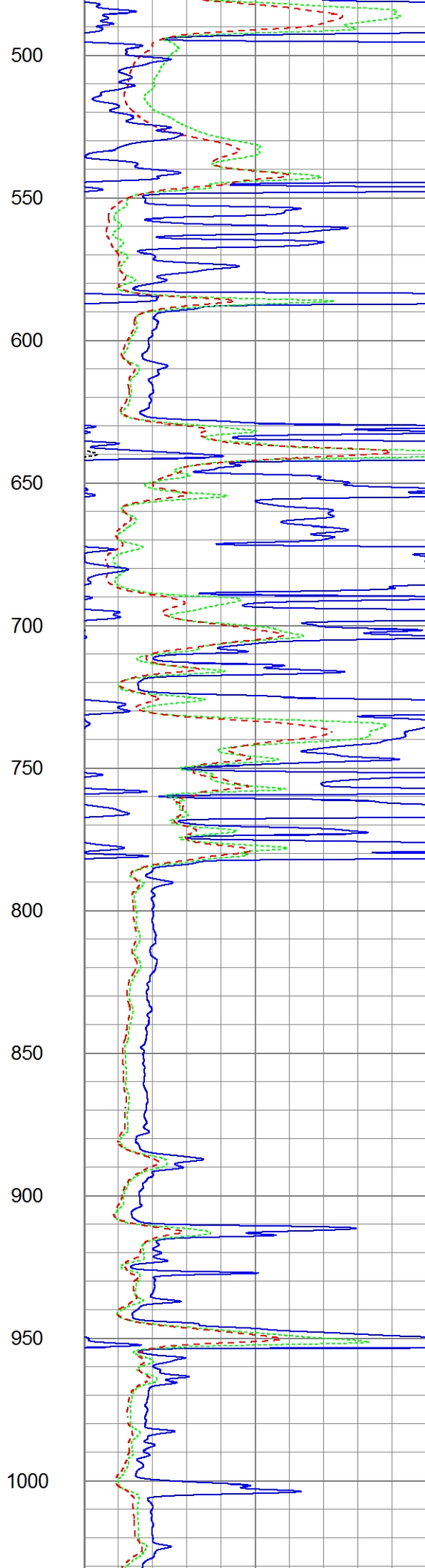
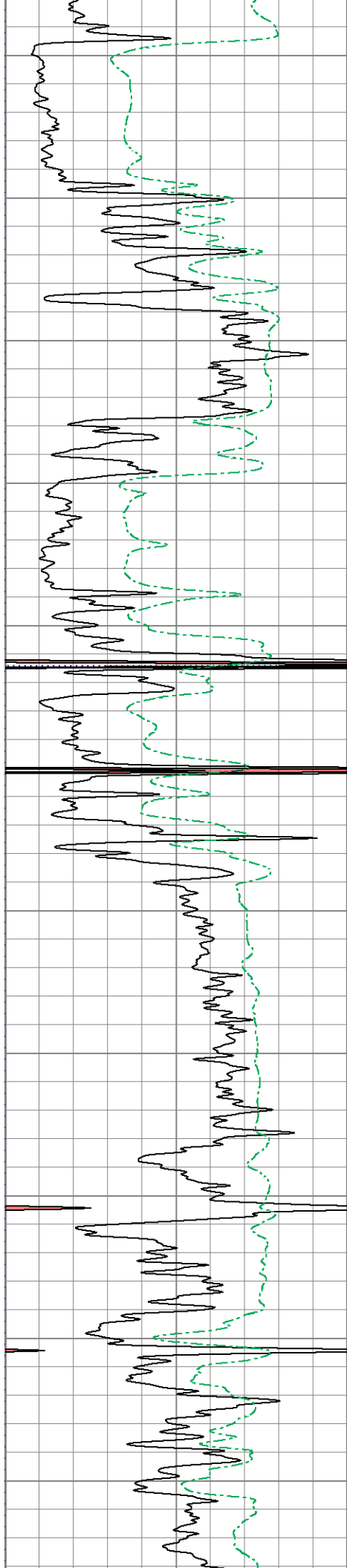
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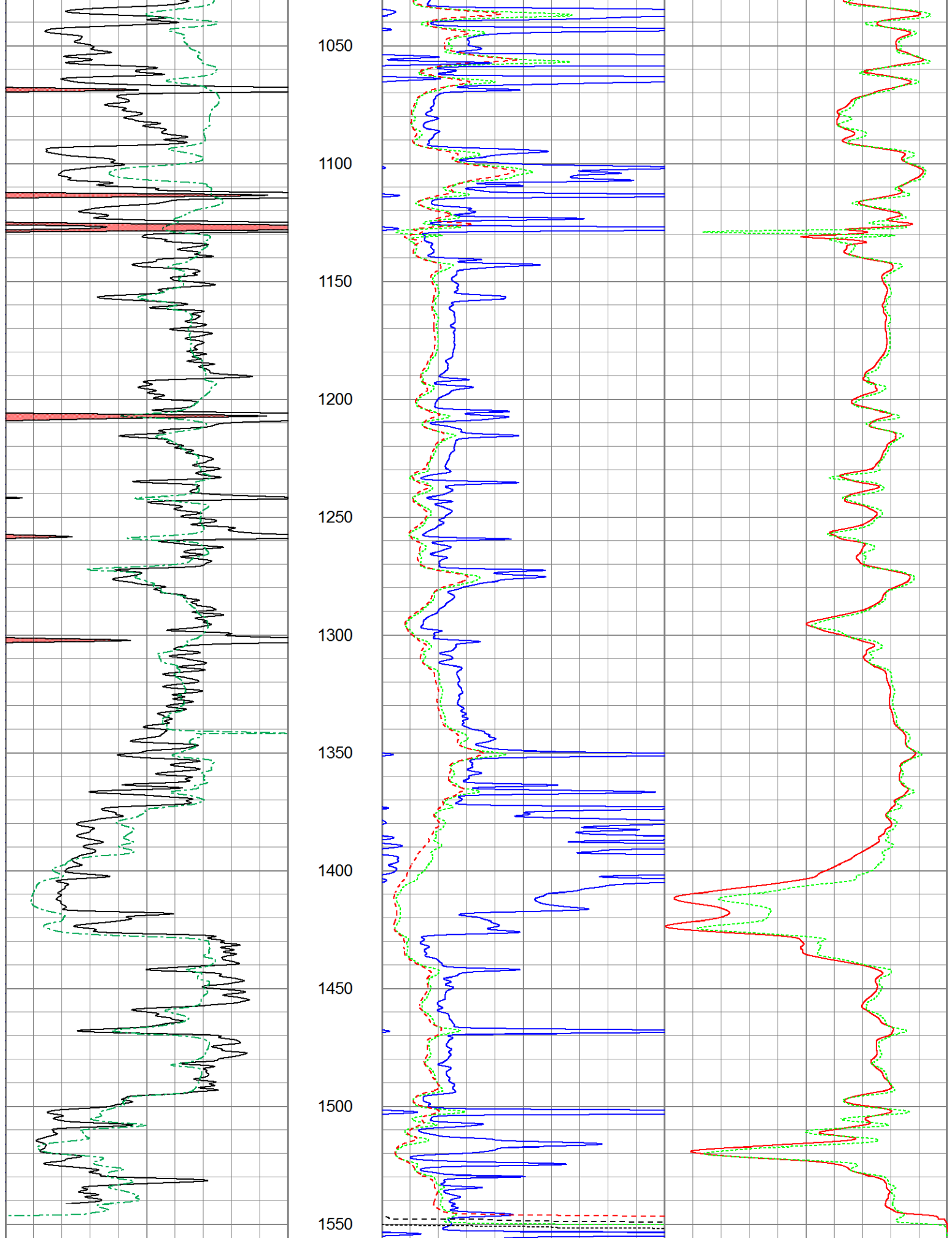
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0	GR (GAPI)	150
0	SP (mV)	200

1000	CILD (mmho/m)	0
1000	CILM (mmho/m)	0
0	RLL3 (Ohm-m)	50
0	RILM (Ohm-m)	50
0	RILD (Ohm-m)	50







0	GR (GAPI)	150
0	SP (mV)	200

1000	CILD (mmho/m)	0
1000	CILM (mmho/m)	0

0	RLL3 (Ohm-m)	50
0	RILM (Ohm-m)	50
0	RILD (Ohm-m)	50

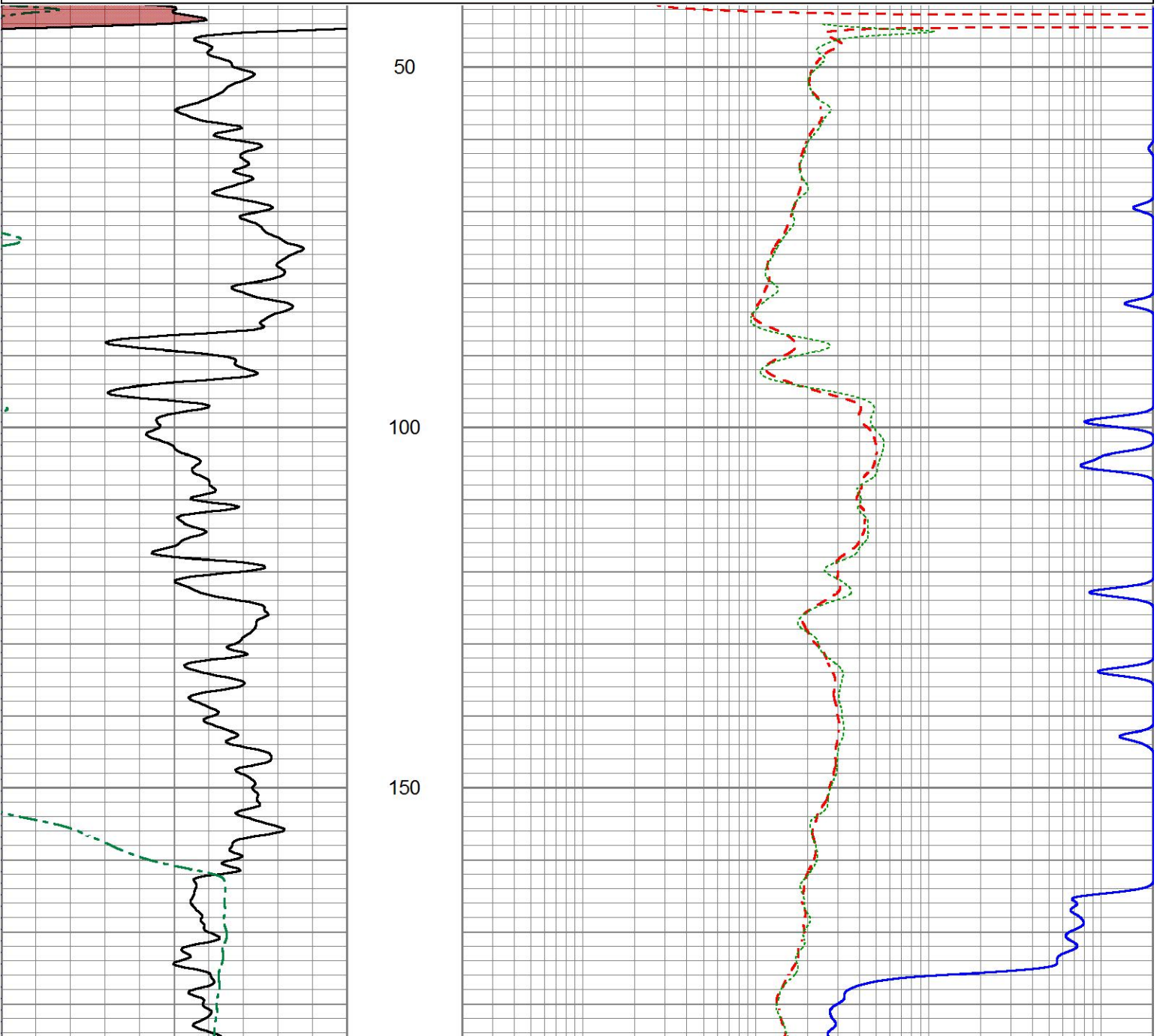


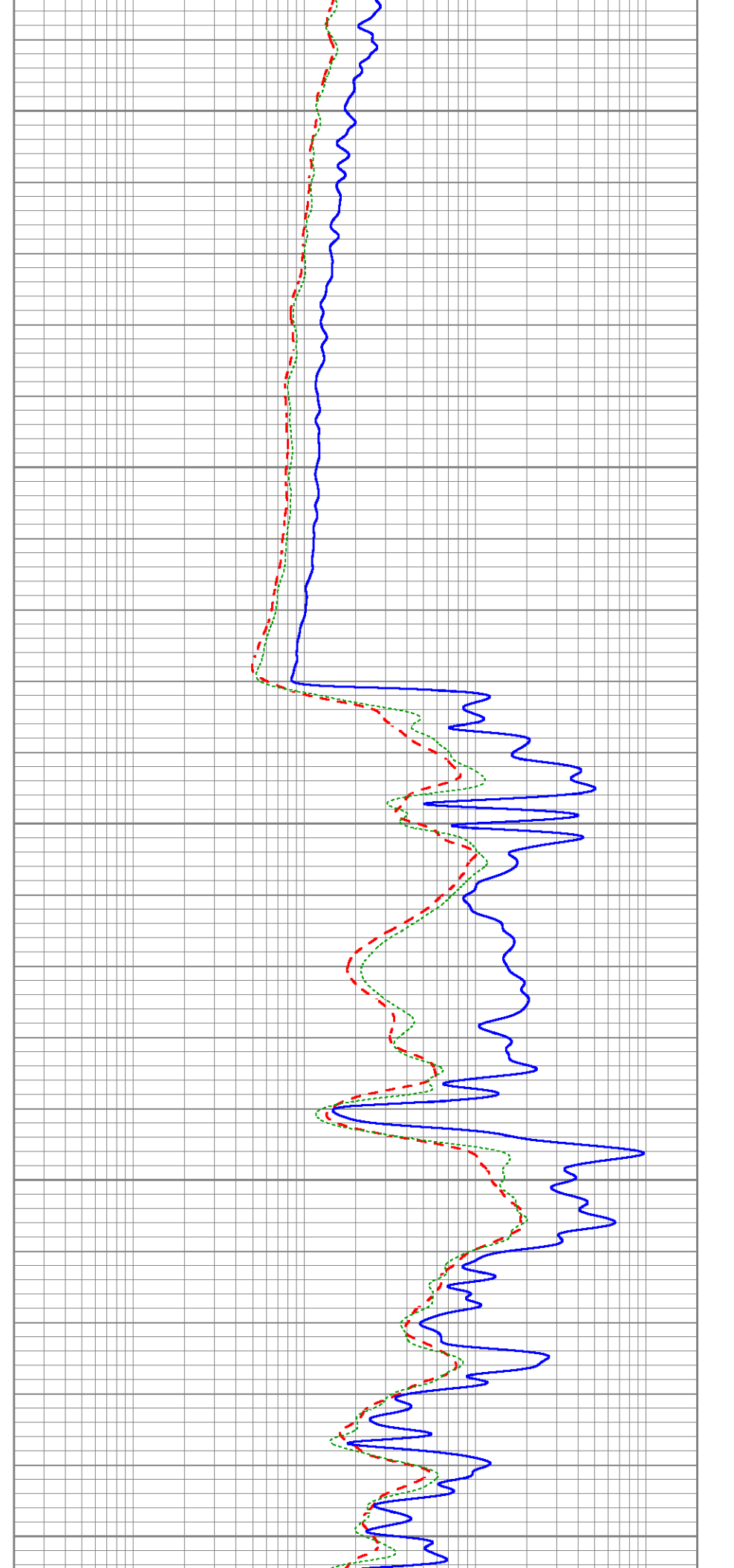
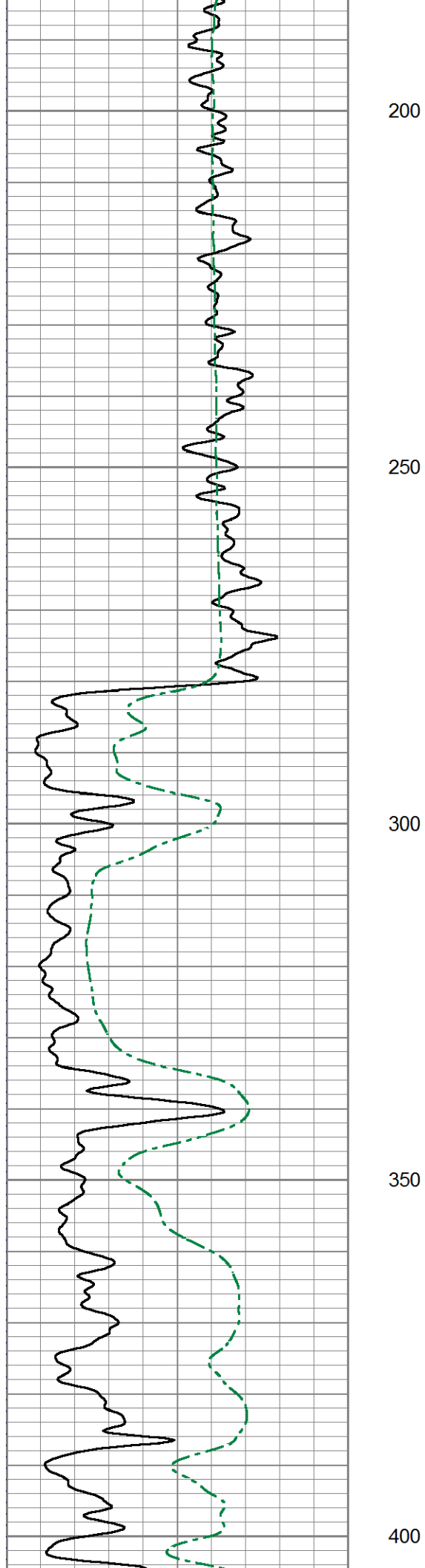
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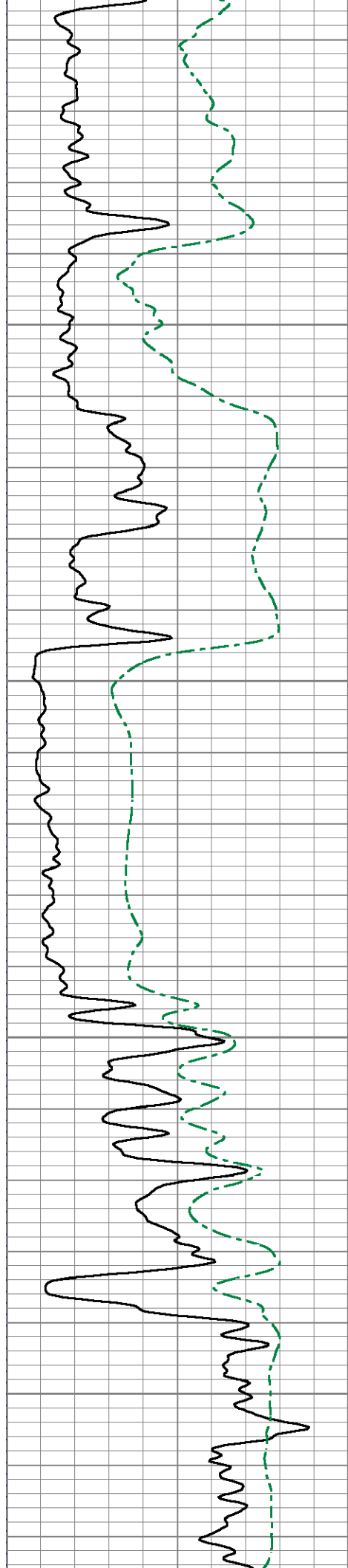
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0	Gamma Ray (GAPI)	150
0	SP (mV)	200

0.2	Deep Resistivity (Ohm-m)	2000
0.2	Medium Resistivity (Ohm-m)	2000
0.2	Shallow Resistivity (Ohm-m)	2000





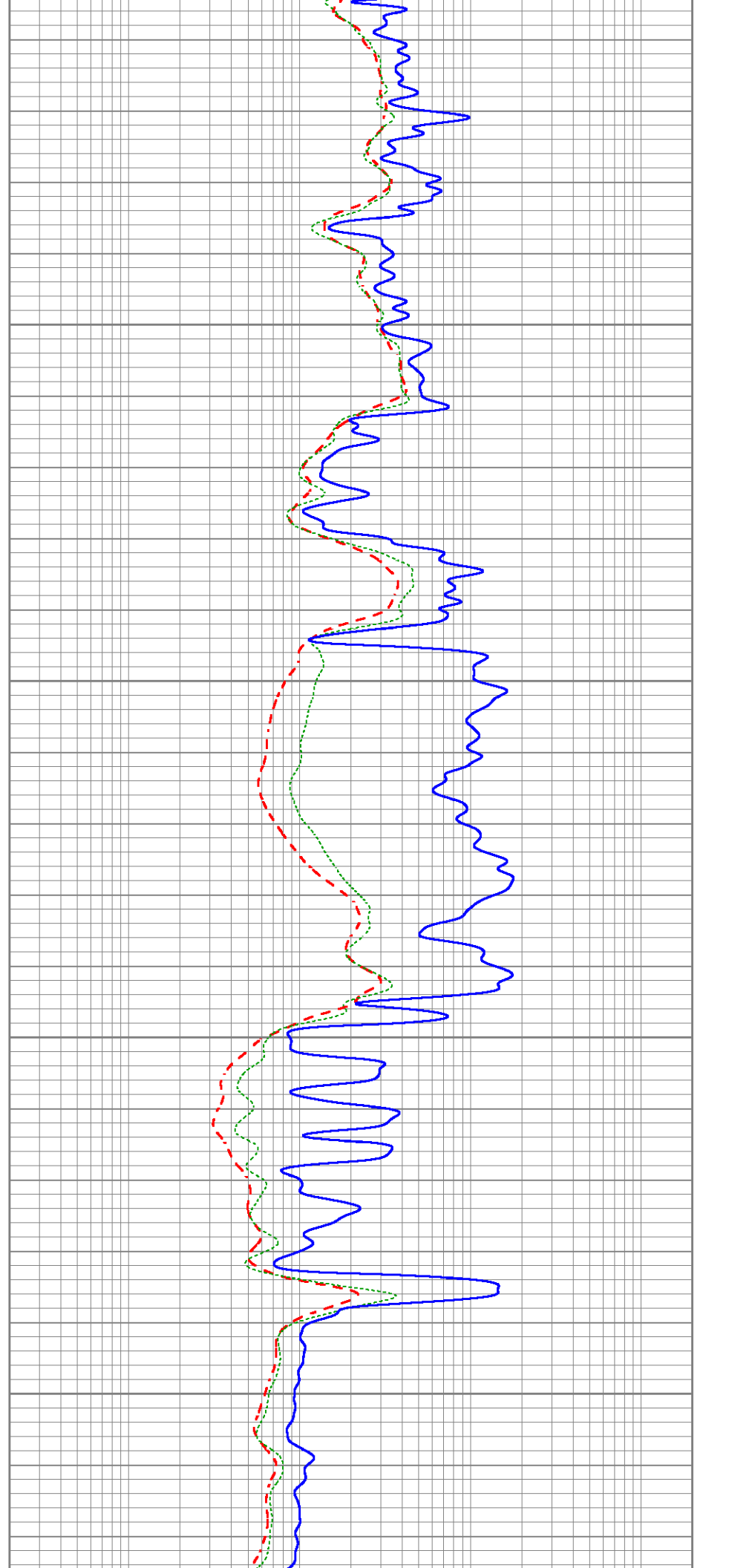


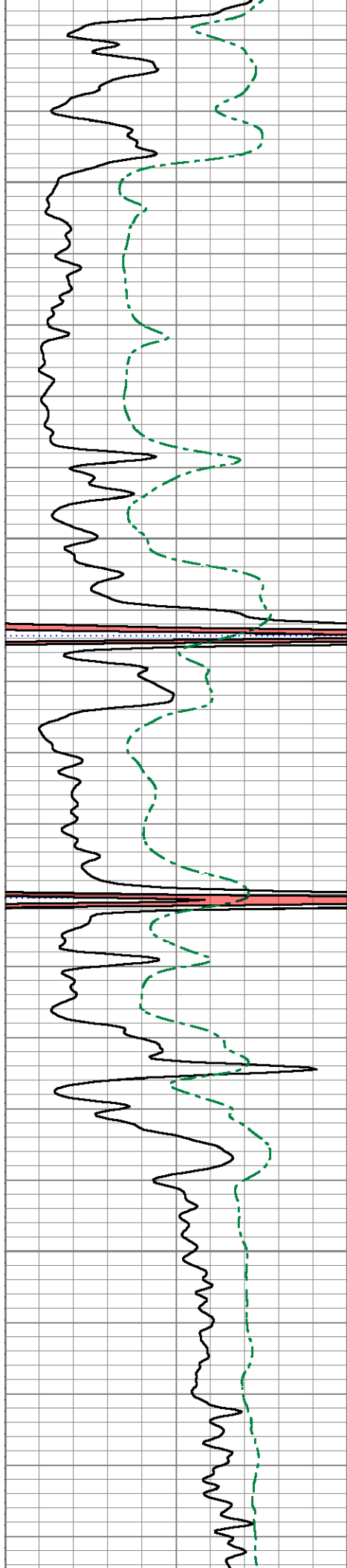
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500

550

600



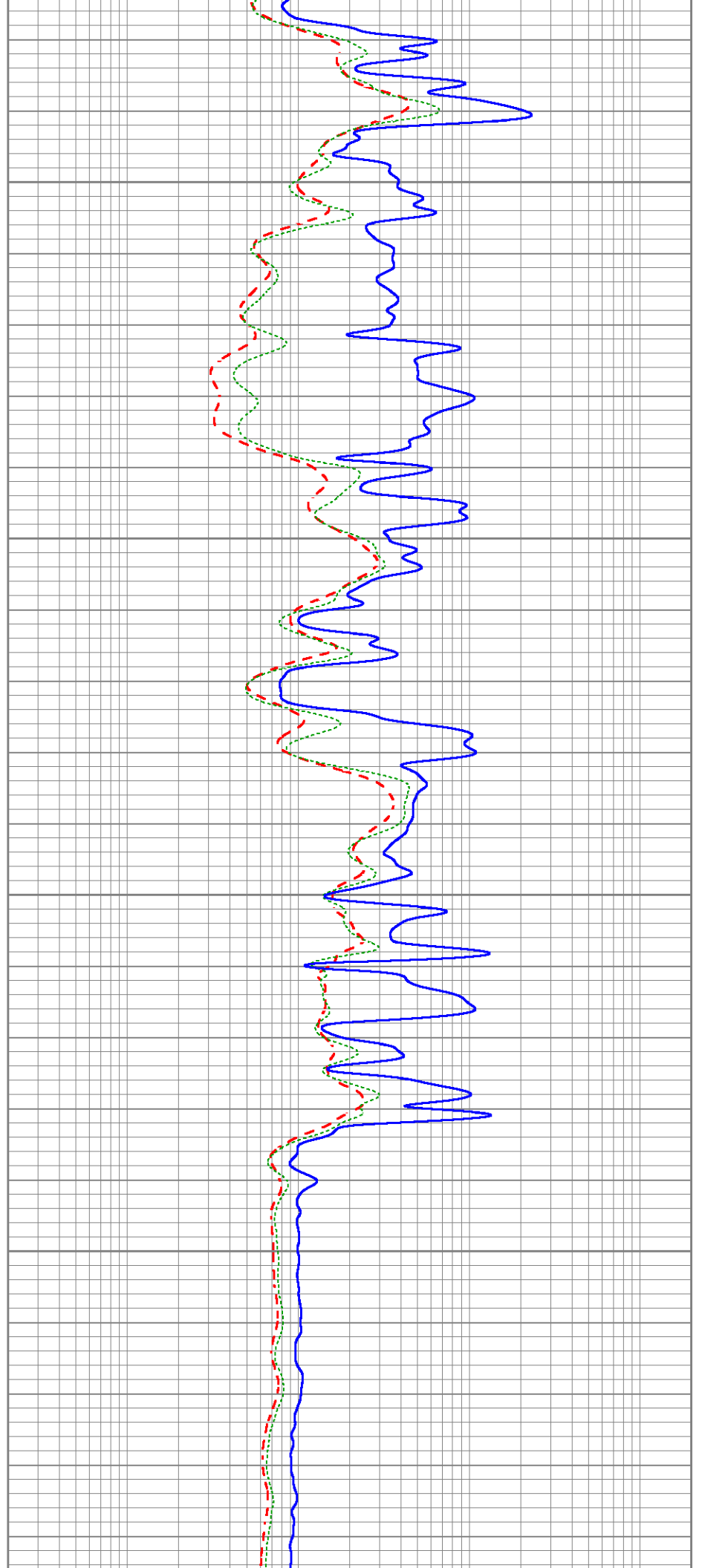


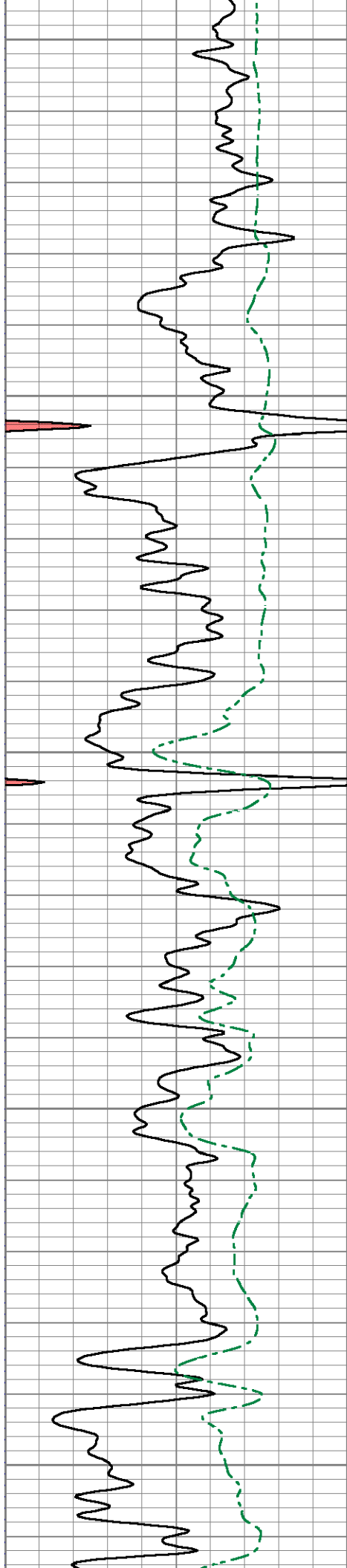
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700

750

800





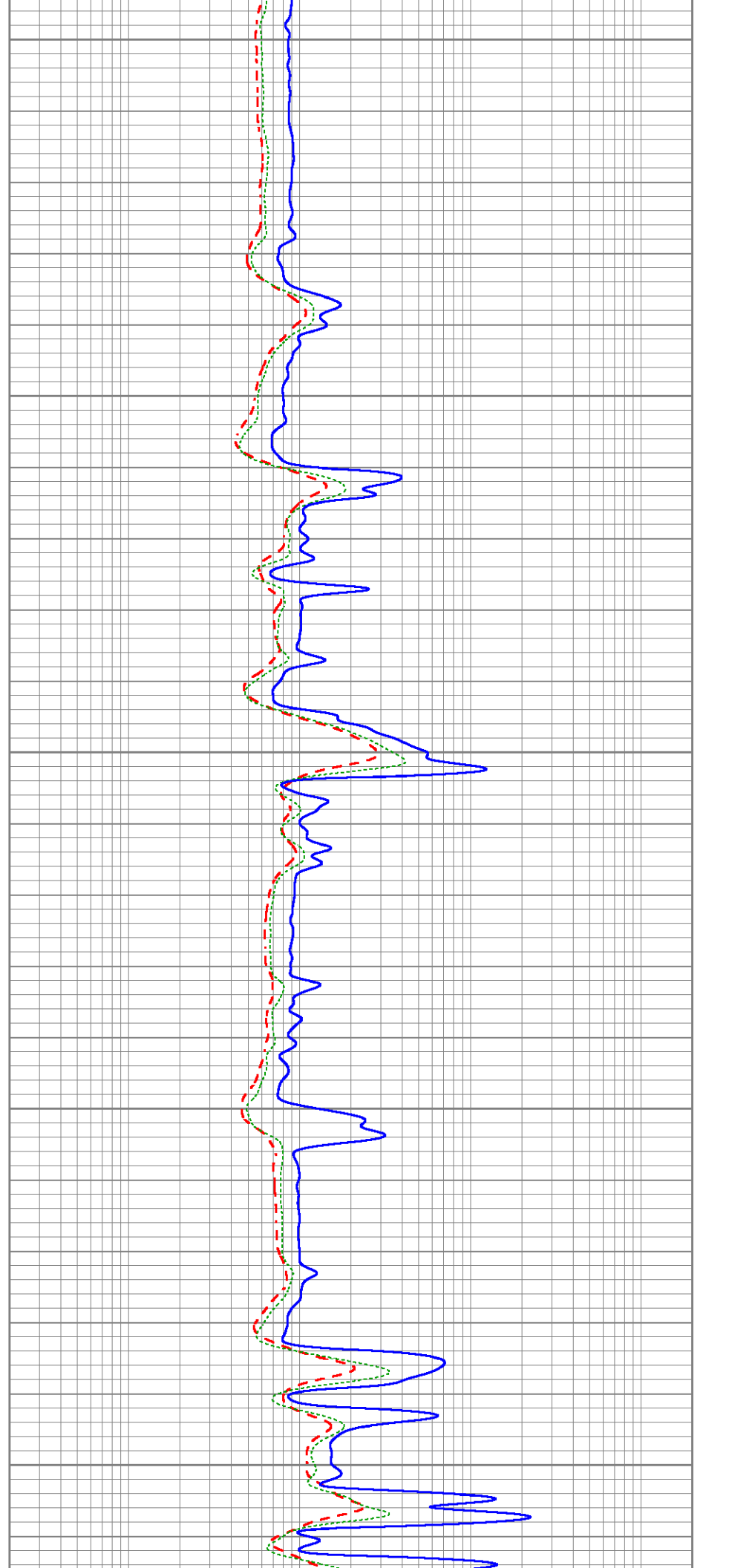
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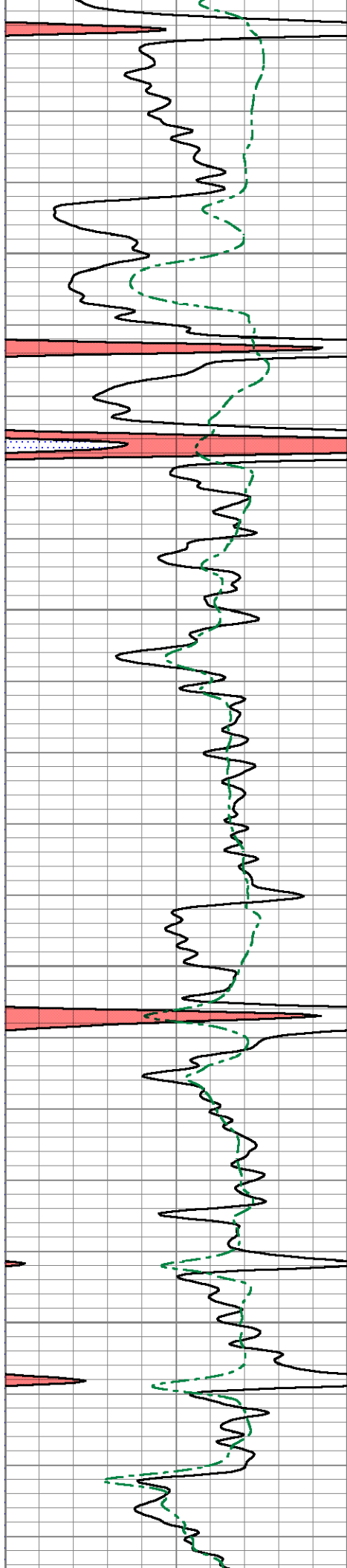
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950

1000

1050



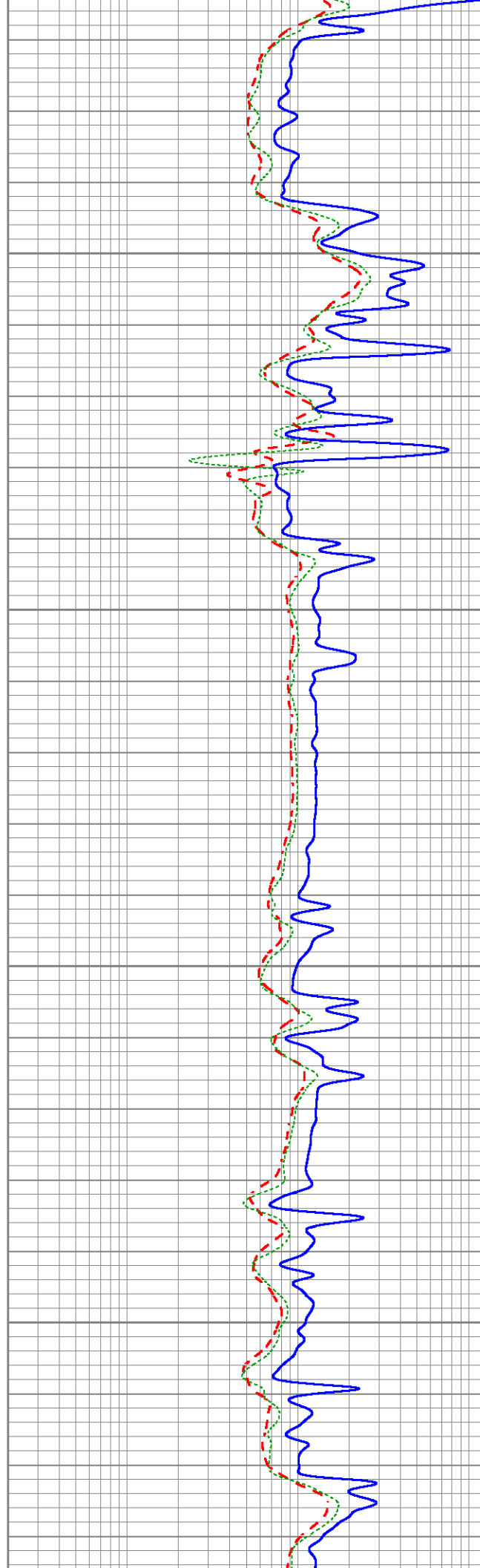


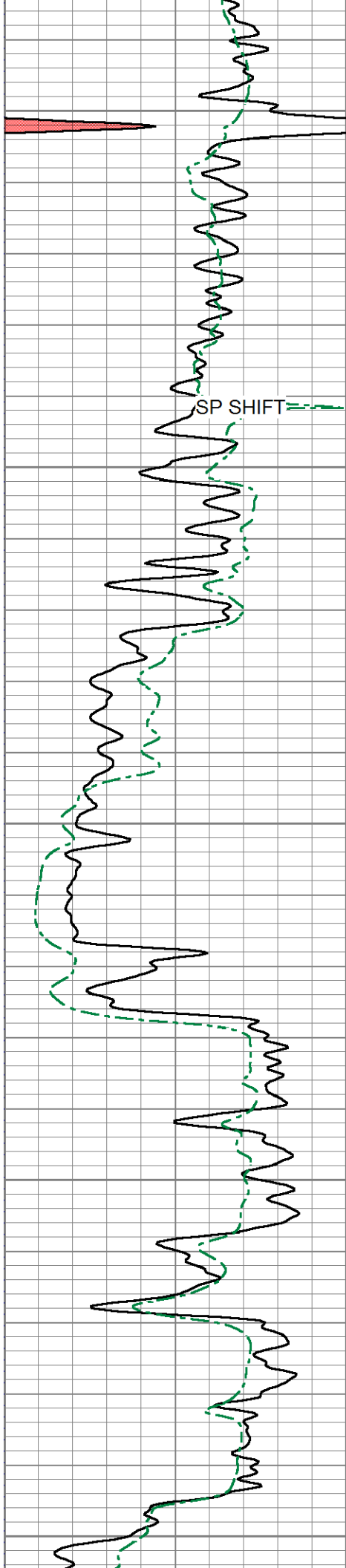
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1150

1200

1250





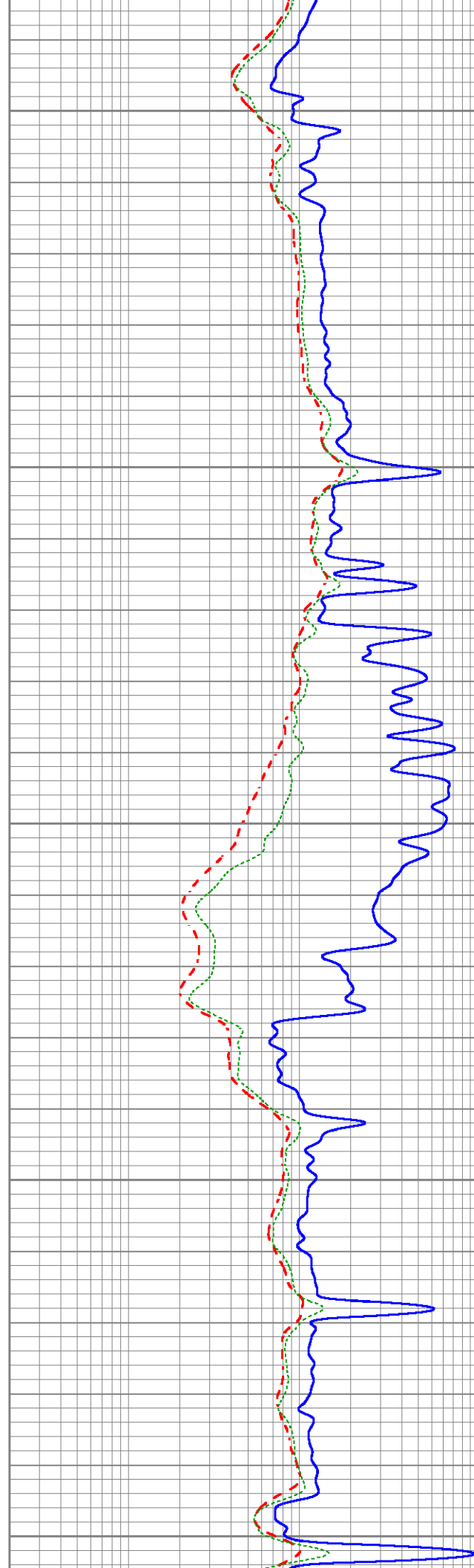
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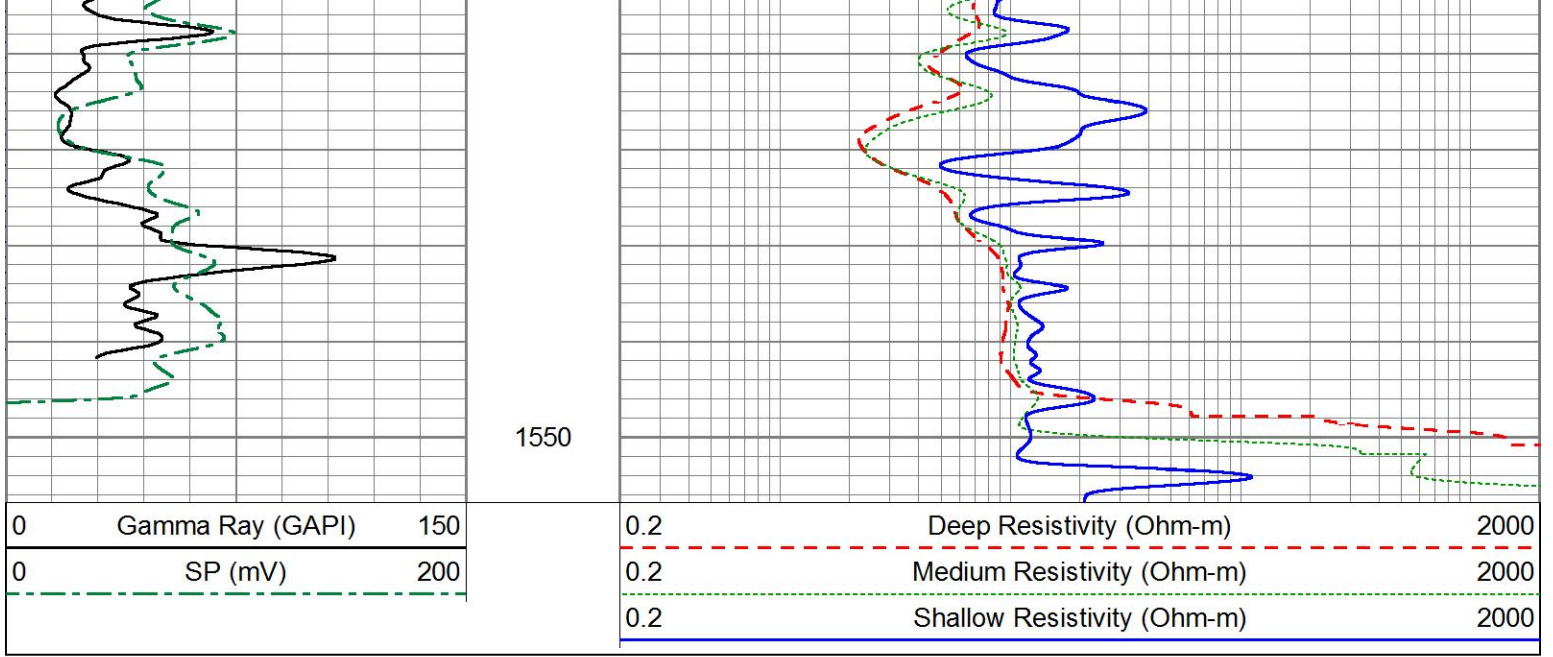
1350

1400

1450

1500





Sensor	Offset (ft)	Schematic	Description	Length (ft)	O.D. (in)	Weight (lb)
			Cable-CableHead Isulation Sub	1.42	3.00	20.00
CILD SP	10.92 10.42		DIL-GEAR (158) Dual Induction Electrical Log	21.36	4.00	395.00
CILM	7.00					
RLL3	1.65					

Dataset: ow2-8902 colt energy.db: field/well/DIL/pass1
 Total length: 22.78 ft
 Total weight: 415.00 lb
 O.D.: 4.00 in

Conservation Division
266 N. Main St., Ste. 220
Wichita, KS 67202-1513



Phone: 316-337-6200
Fax: 316-337-6211
<http://kcc.ks.gov/>

Jay Scott Emler, Chairman
Shari Feist Albrecht, Commissioner
Pat Apple, Commissioner

Sam Brownback, Governor

January 26, 2016

LOREN STEINFORTH
Steinforth, Loren
461 HAWK RD
YATES CENTER, KS 66783-5181

Re: Plugging Application
API 15-207-29321-00-00
ASHLEY(STEINFORTH) 10
NW/4 Sec.13-26S-14E
Woodson County, Kansas

Dear LOREN STEINFORTH:

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 July 26, 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 July 26, 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