



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	SandRidge Exploration and Production LLC
Well Name	Stephanie 2-3 SWD
Doc ID	1285793

Perforations And Bridge Plug Sets

Perforation Top	Perforation Base	Formation	Bridge Plug Depth
5572	6585	Arbuckle	5555



Well name: Stephanie 2-3 SWD

API Number: 15-007-2380
 AFE# PX12593
 Corp ID 120496
 Field: Stranathan
 County, State: Barber, KS
 Legals: 3-35S-10W

Surface Location: 2134' FSL 327' FEL
 Elevation: 1327' KB 1316' GL
 Depths: 6585' MD 6585' PBTB 2780' TOC (calc)

Engineer: Austin Smith 405-902-3627 asmith@sandridgeenergy.com
 SWD Foreman: Andy Ferguson 405-519-3136 aferguson@sandridgeenergy.com
 SWD Superintendent Kevin Heasley 405-635-5501 kheasley@sandridgeenergy.com

CSG	Bit Size	OD	ID	Drift	Grade	Thd	Wt/Ft	Cap (bpf)	Burst	Collapse	Top	Set @
Surface	12.25	9.625	8.921	8.765	J-55	LT&C	36.0#	0.0773	3520	2020	0'	965'
Int	8.75	7.000	6.276	6.151	J-55	LT&C	26.0#	0.0382	4980	4320	0'	5,572'

Maximum allowable pressure is limited by 3K B-Section: 3000 psi

What's New:

- 1) Plug and Abandon Well
- 2) Set cement below casing shoe and tag
- 3) Spot cement plugs as needed for fresh water formations
- 4) Cut and cap well
- 5) Contact KCC representative for Barber County (620-255-8888) at least 48 hours prior to beginning operations. Insure contact is person-to-person. Voicemail is not acceptable for regulatory agencies.

Background:

Original tube up date was 5/19/2012, completed with 7" x 3-1/2" Baker AS-1X PKR, 136 jts of 4-1/2" 11.6# J-55 LT&C.

Directions:

~FROM THE JCT. OF STATE HWY. 58 & SW 70 RD, TRAVEL WEST ON SW 70 RD FOR 5 MILES, TURN LEFT (SOUTH) ON SANDPLUM RD AND TRAVEL 2 MILES TO THE SE CORNER OF SEC 3-35S-10W.~

Workover Summary

RIH and retrieve Bridge plug and set cement plugs per KCC request.

THE SAFETY OF PERSONNEL AND PROTECTION OF THE ENVIRONMENT IS OF PRIMARY CONCERN DURING ANY OPERATION. UNDER NO CIRCUMSTANCE SHOULD SAFETY OR ENVIRONMENTAL PROTECTION BE COMPROMISED.



UNDER NO CIRCUMSTANCE SHOULD SAFETY OR ENVIRONMENTAL PROTECTION BE COMPROMISED.

SANDRIDGE ENERGY REQUIRES THAT HARD HATS, STEEL TOED BOOTS, SAFETY GLASSES AND FRCs BE WORN ON LOCATION AT ALL TIMES.

HOLD SAFETY MEETING & COMPLETE JSAs PRIOR TO COMMENCING ALL OPERATIONS. ALL PERSONNEL ON LOCATION MUST BE BRIEFED AND MUST SIGN JSAs.

NO IGNITION SOURCE WITHIN 50 FT OF THE WELLHEAD, FLOWBACK TANKS OR PRODUCTION EQUIPMENT.

Detailed Procedure

1. MIRU WOR, 2 transports and pump truck. Hold JSA. Discuss workover scope, well control plans, meeting areas in case of emergencies and follow SD lockout/tagout procedures prior to any work being done on location to ensure all equipment is secured when workover begins. Check 9-5/8" x 7" annulus pressure, and report to Engineer if pressure exists. Attempt to bleed down to 0#, and proceed if bled down.
2. Blow down tubing and casing. Verify other casing valve is shut-in. ND Tree and install 4-1/2" 11.6# J-55 sub with XO and TIW valve. NU 7-1/16" 3k hydraulic BOP (w/ blind rams on bottom and 2-7/8" pipe rams on top). Have BOP vendor stump test blind rams and pipe rams to 3000# prior to BOP delivery. Chart test and have chart delivered with BOP. Retain chart until job is complete
3. RIH with 2-7/8" WS and Baker Hughes retrieving head retrieve bridge plug @ 5,555'.
4. Spot 75 sxs Class C cement mixed at 14.8 ppg and yield of 1.2 cf/sk at 5,557'. Tag cement top
5. Circulate hole w/ plugging mud (density \geq 9 ppg and viscosity \geq 36 cp). TOO H w/ tubing.
6. ND BOP. Weld on 7" pull sub. NU BOP w/ 7" rams. Pull stretch on 7" casing to verify free point. TIH w/ split shot to free point. Locate casing collar, shoot off casing. TOO H w/ 7" casing and laydown (+/- 2,000'). **Test all pulled csg for NORM. Use hydraulic machine when laying down casing.**
7. TIH w/ tbg. Spot/tag following cement plugs:
 - I. 7" casing stub - 50 sxs Class C cement. No tag required.
 - II. In/out 1060' 100 sxs. POH w/ tbg WOC and tag TOC (865' or higher)
 - III. 64-4' 32 sxs
8. Tie pump onto surface csg x production annulus. Top off annulus w/ cmt as needed (cmt was circulated to surface during previous completion operations).
9. MIRU welder. Cut off casing 4' below ground level. Weld plate on top of surface casing. Plate should contain well name or API number and date of plugging. Plate should also have weep hole to enable monitoring of any future leakage of plugs. RDMO welder. Transfer tubing and casing to Cherokee yard.
10. RDMO WOR. Cut and cap well. Dig up anchors.
11. Release all equipment.

Austin Smith – Facilities Engineer

Carl Enright – Workover Engineer



Original Completion

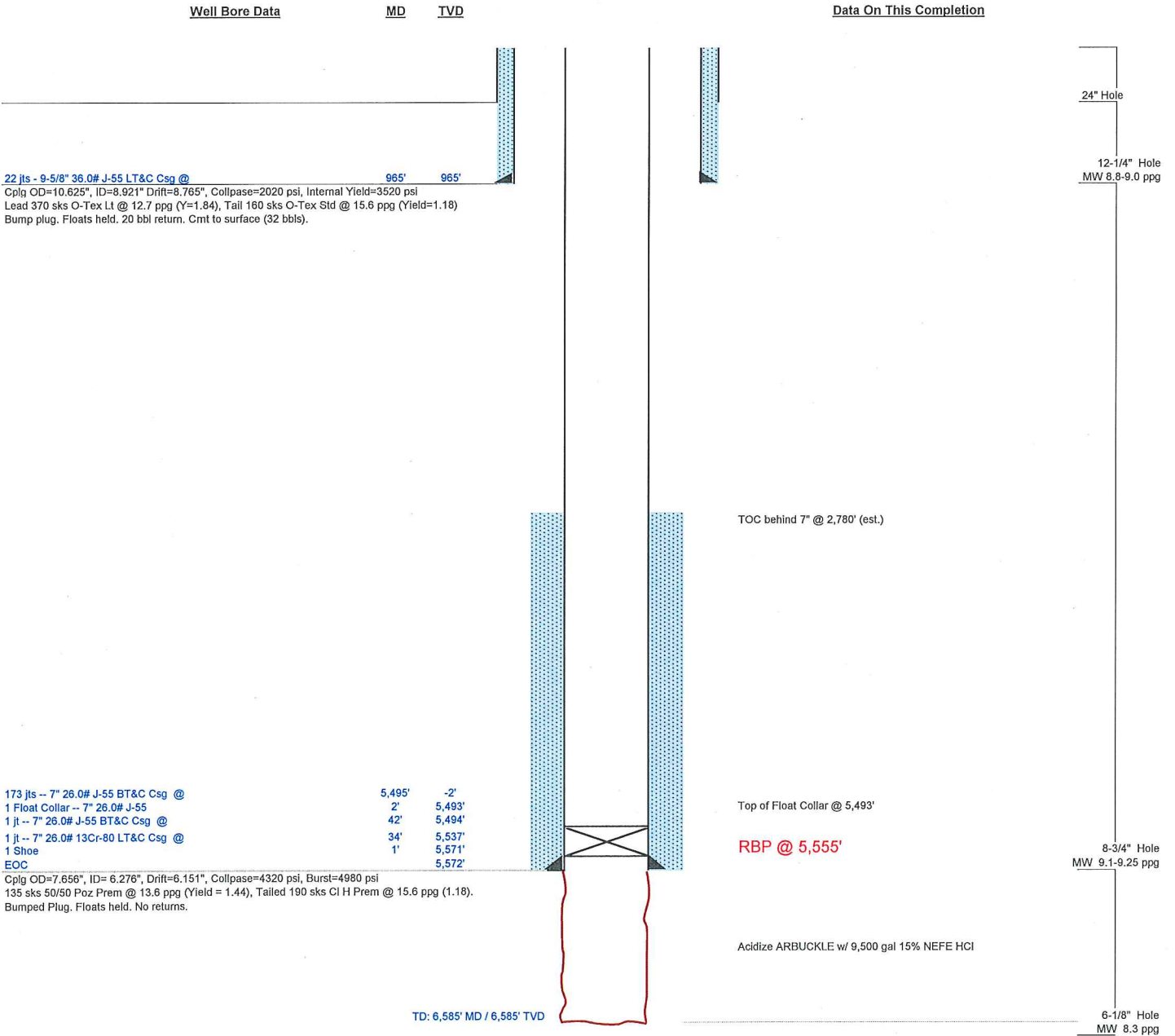
Field Stranathan
 County Barber
 State Kansas
 Well **Stephanie 2-3 SWD**
 Location SEC 03, TWP 35S, RGE 10W
 KB 1327
 GL 1316

Wellbore Schematic

15-007-23800

 API NO.

Original Completion	
Current	X
Proposed	



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

February 16, 2016

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

Re: Plugging Application
API 15-007-23800-00-00
Stephanie 2-3 SWD
SE/4 Sec.03-35S-10W
Barber 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 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 August 16, 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 August 16, 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