



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

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.

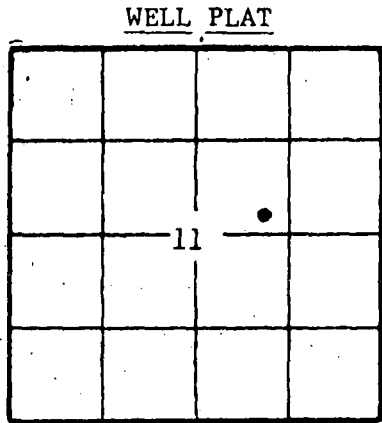
Attach separate letter of request if the information is to be held confidential. If confidential, only file one copy. Information on Side One will be of public record and Side Two will then be held confidential.

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 # 5370 EXPIRATION DATE 6-30-83
 OPERATOR Richard A. Soule API NO. 15-073-22,349 -00-00
 ADDRESS 822 E. River COUNTY Greenwood
Eureka, Ks. 67045 FIELD Teeterville
 ** CONTACT PERSON Richard A. Soule PROD. FORMATION Bartlesville
 PHONE 316-583-5287
 PURCHASER Getty Oil LEASE Green A
 ADDRESS P O Box 3000 WELL NO. 16
Tulsa, Oklahoma 74102 WELL LOCATION SE SW NE
 DRILLING EDCO Drilling Co. 330 Ft. from South Line and
 CONTRACTOR ADDRESS P O Box 645 990 Ft. from West Line of
El Dorado, Ks. 67042 the NE (Qtr.) SEC 11 TWP 23S RGE 9E

PLUGGING CONTRACTOR ADDRESS _____



(Office Use Only)
 KCC _____
 KGS _____
 SWD/REP _____
 PLG. _____

TOTAL DEPTH 2449' KB PBDT _____
 SPUD DATE 5-26-82 DATE COMPLETED 6-4-82
 ELEV: GR _____ DF _____ KB 1391'

DRILLED WITH (CABLE) (ROTARY) (AIR) TOOLS.
 DOCKET NO. OF DISPOSAL OR REPRESSURING WELL BEING USED TO DISPOSE OF WATER FROM THIS LEASE 17234-C
(C-10170)
 Amount of surface pipe set and cemented 85' 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.

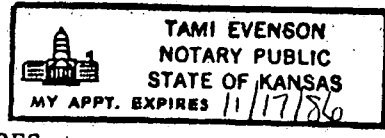
A F F I D A V I T

Richard A. Soule, 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. Soule
 (Name)

SUBSCRIBED AND SWORN TO BEFORE ME this 10th day of March, 1983.



Tami Evenson
 (NOTARY PUBLIC)

MY COMMISSION EXPIRES: _____

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

RECEIVED
 STATE CORPORATION COMMISSION

DEC 22 1983

CONSERVATION DIVISION
 Wichita, Kansas

SIDE TWO

ACO-1 WELL HISTORY

OPERATOR Richard A. Soule

LEASE Green A

SEC. 11 TWP. 23S RGE. 9E

FILL IN WELL LOG AS REQUIRED:

Well #16

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 and shut-in pressures, and recoveries.

SHOW GEOLOGICAL MARKERS, LOGS RUN, OR OTHER DESCRIPTIVE INFORMATION:

FORMATION DESCRIPTION, CONTENTS, ETC.	TOP	BOTTOM	NAME	DEPTH
Sod	0'	8	Base Kansas C.	1857 (-466)
Lime & shale	8	163	Cherokee	2114 (-723)
Shale & lime	163	970	Ardmore	2195 (-804)
Shale w/limestreaks	970	1037	Bartlesville	
Lime w/shale	1037	1120	sand	2322 (-931)
Shale w/limestreaks	1120	1284	Base Bartles-	
Lime	1284	1289	ville sand	2367 (-976)
Shale w/limestreaks	1289	1418	Mississippi	2442 (-1051)
Lime	1418	1551	RTD	2449 (-1058)
Shale & lime	1551	1668		
Lime	1668	1857		
Shale	1857	1919		
Lime w/shale	1919	2114		
Shale w/limestreaks	2114	2197		
Lime w/shale	2197	2211		
Shale w/limestreaks	2211	2295		
Shale	2295	2322		
Sand	2322	2367		
Shale	2367	2449		

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

Purpose of string	Size hole drilled	Size casing set (in O.D.)	Weight lbs/ft.	Setting depth	Type cement	Sacks	Type and percent additives
Surface	12 1/2	8 5/8	24#	85	Common	50	3% c.c.
Production	6 3/4	4 1/2	11.79#	2447	Poz-Mix	150	10% salt - 2% gel

LINER RECORD

PERFORATION RECORD

Top, ft.	Bottom, ft.	Sacks cement	Shots per ft.	Size & type	Depth interval
TUBING RECORD			irregular		2320-2344
Size	Setting depth	Packer set at			
2 3/8	2350				

ACID, FRACTURE, SHOT, CEMENT SQUEEZE RECORD

Amount and kind of material used	Depth interval treated
nitrogen sand foam frac	2320-2344
50 sks 20-40, 50 sks 10-20, 25 sks 8-12	
250 gal 15% acid, 195,000 scf nitrogen, 150 bbl. water	
Date of first production	Producing method (flowing, pumping, gas lift, etc.)
6-15-82	pumping
Gravity	40
RATE OF PRODUCTION PER 24 HOURS	Oil
	6 bbls.
Gas	-0-
Water	96 %
Gas-oil ratio	150 bbls.
Disposition of gas (vented, used on lease or sold)	Perforations
	2320-2344

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

April 18, 2016

Jonathan Freiden
Ace Energy LLC
11704 ABERDEEN RD
LEAWOOD, KS 66211

Re: Plugging Application
API 15-073-22349-00-00
GREEN 16
NE/4 Sec.11-23S-09E
Greenwood County, Kansas

Dear Jonathan Freiden :

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 October 18, 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 October 18, 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