



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. 15-073-22,348
ADDRESS 822 E. River Eureka, Ks. 67045
\*\* CONTACT PERSON Richard A. Soule PHONE 316-583-5287

PURCHASER Getty Oil LEASE Green A
ADDRESS P O Box 3000 Tulsa, Oklahoma 74102
WELL NO. 15
WELL LOCATION NW 1/4
850 Ft. from East Line and
1280 Ft. from North Line of
the NW (Qtr.) SEC 11 TWP 23S RGE 9E.

PLUGGING CONTRACTOR ADDRESS

WELL PLAT

(Office Use Only)

Grid table for well plat with 4 columns and 4 rows. Section 11 is marked in the center.

KCC
KGS
SWD/REP
PLG.

TOTAL DEPTH 2481' KB PBD
SPUD DATE 5-26-82 DATE COMPLETED 5-29-82
ELEV: GR DF KB 1427'

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

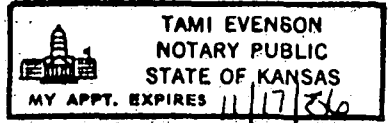
A F F I D A V I T

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

OPERATOR Richard A. Soule LEASE Green A

SEC. 11 TWP. 23S RGE. 9E

**FILL IN WELL LOG AS REQUIRED:**

Well #15

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 K.C.	1894 (-467)
Shale w/lime	8	106	Altamont	2003 (-576)
Lime w/shale	106	187	Cherokee	2156 (-729)
Shale w/lime	187	480	Ardmore	2239 (-812)
Lime w/shale	480	580	Bartlesville	
Shale w/lime	580	650	sand	2364 (-937)
Shale w/limestreaks	650	1340	Base Bartles-	
Sand & shale	1340	1454	ville sand	2415 (-988)
Lime	1454	1587	Mississippi	2480 (-1053)
Shale w/lime	1587	1701	RTD	2481 (-1054)
Lime	1701	1894		
Shale	1894	2000		
Lime & shale	2000	2156		
Shale w/limestreaks	2156	2364		
Sand	2364	2415		
Shale	2415	2482		

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	4% c.c.
Production	6 3/4	4 1/2	11.79#	2480	Poz-Mix	150	2% gel - 10% salt

**LINER RECORD**

**PERFORATION RECORD**

Top, ft.	Bottom, ft.	Sacks cement	Shots per ft.	Size & type	Depth interval
			irregular		2347-2381

**TUBING RECORD**

Size	Setting depth	Packer set at
2 3/8	2330	

**ACID, FRACTURE, SHOT, CEMENT SQUEEZE RECORD**

Amount and kind of material used	Depth interval treated			
nitrogen sand foam frac	2347-2381			
50 sks 20-40, 50 sks 10-20, 25 sks 8-12				
250 gal. 15% acid, 168,000 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	Gas	Water	Gas-oil ratio
	4 bbls.	-0-	98 MCF % 200	bbls. CFPB
Disposition of gas (vented, used on lease or sold)	Perforations 2347-2381			

April 19, 2016

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

Re: Plugging Application  
API 15-073-22348-00-00  
GREEN 15  
NW/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 19, 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 19, 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