



KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

1309933

Form CP-1

March 2010

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

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
ACO-1 WELL HISTORY
DESCRIPTION OF WELL AND LEASE

API NO. 15- 077-21380-0000

County HARPER

Operator: License # 31769

Name: GREELEY GAS COMPANY

Address 1300 PENNSYLVANIA

PENN CENTER SUITE 800

City/State/Zip DENVER, CO. 80203-5015

Purchaser:

Operator Contact Person: STEVE MITCHELL

Phone (303) 831-5685

Contractor: Name: MCLEAN H. L. DRILLING CO.

License: 09322

Wellsite Geologist:

Designate Type of Completion

☒ New Well ☐ Re-Entry ☐ Workover

☐ Oil ☐ SUD ☐ SLOW ☐ Temp. Abd.
☐ Gas ☐ ENHR ☐ SIGW
☐ Dry ☒ Other (Core, WSW, Expl., Cathodic) etc)

If Workovers:

Operator:

Well Name:

Comp. Date Old Total Depth

☐ Deepening ☐ Re-perf. ☐ Conv. to Inj/SUD
☐ Plug Back ☐ PBTB
☐ Commingled ☐ Docket No.
☐ Dual Completion ☐ Docket No.
☐ Other (SUD or Inj?) ☐ Docket No.

02-09-2000 02-10-2000 02-11-2000
 Spud Date Date Reached TD Completion Date

- SW Sec. 24 Twp. 33S Rge. 7 ☒ E1550 Feet from ☒ N (circle one) Line of Section2450 Feet from ☒ E (circle one) Line of SectionFootages Calculated from Nearest Outside Section Corner:
NE, SE, NW or ☒ (circle one)

Lease Name RECTIFIER #11 Well # 8

Field Name

Producing Formation

Elevation: Ground KB

Total Depth 250' PBTB

Amount of Surface Pipe Set and Cemented at 40' Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set Feet

If Alternate II completion, cement circulated from

feet depth to w/ sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content 1500 ppm Fluid volume bbls

Dewatering method used

Location of fluid disposal if hauled offsite:

AGREEMENT FILED WITH BOREHOLE INTENT CB-1

Operator Name CITY OF ANTHONY, KS.

Lease Name License No.

NW Quarter Sec. 25 Twp. 33 S Rng. 7 ☒ E

County HARPER

Docket No.

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information on side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form (see rule 82-3-107 for confidentiality in excess of 12 months). One copy of all wireline logs and geologist well report shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Signature

Title Vice President, Technical Service Date 2-21-2000

Subscribed and sworn to before me this 21st day of February, 2000.

Notary Public

Date Commission Expires July 17th, 2000

K.C.C. OFFICE USE ONLY

F Letter of Confidentiality Attached
 C Wireline Log Received
 C Geologist Report Received

Distribution

KCC SUD/Rep NGPA
 KGS Plug Other
 (Specify)

Operator Name GREELEY GAS COMPANY

SIDE TWO

Lease Name RECTIFIER # 11Well # 8Sec. 24 Twp. 33S Rge. 7☐ EastCounty HARPER☒ West

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface during test. Attach extra sheet if more space is needed. Attach copy of log.

Drill Stem Tests Taken
(Attach Additional Sheets.)☐ Yes ☐ No

Samples Sent to Geological Survey

☐ Yes ☐ No

Cores Taken

☐ Yes ☐ NoElectric Log Run
(Submit Copy.)☐ Yes ☐ No

List All E.Logs Run:

SEE ATTACHED LOG

☐ Log

Formation (Top), Depth and Datums

☐ Sample

Name

Top

Datum

WELL HAS BEEN PRE-PLUGGED

CASING RECORD

☒ New ☐ Used

Report all strings set-conductor, surface, intermediate, production, etc.

Purpose of String	Size Hole Drilled	Size Casing Set (in O.D.)	Weight Lbs./Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
SURFACE	14"	8"	PVC SCHEDULE 40	40'	NEAT	32	

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
Perforate				
Protect Casing				
Plug Back TD				
Plug Off Zone				

Shots Per Foot:	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
	ANODE DEPTHS - 230' - 220' - 210'		
	200' - 190' - 180'		
	170' - 160' - 150'		
	140'		

TUBING RECORD	Size	Set At	Packer At	Liner Run	☐ Yes ☐ No
Date of First, Resumed Production, SMD or Inj.	Producing Method ☐ Flowing ☐ Pumping ☐ Gas Lift ☐ Other (Explain)				
COMPLETION DATE: 02-11-2000					
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

Disposition of Gas:

METHOD OF COMPLETION

Production Interval

☐ Vented ☐ Solid ☐ Used on Lease
(If Vented, submit ACO-18.)

☐ Open Hole ☐ Perf. ☐ Dually Comp. ☐ Conningled
☐ Other (Specify) _____

DEEP WELL GROUNDWATER DATA

UNIT NO: RECTIFIER #11 WELL #8

CITY: ANTHONY, KS.

DATE: 02/09/2000

STATE: KANSAS

COUNTY: HARPER

DISTRICT: KANSAS

CONTRACTOR: McLEANS C P AMARILLO, TX.

INSPECTOR: TERRY HILLIARD

AFE: # JOB # GGC 10657

K.C.C. API #: # 15-077-21380-0000

LOCATION: LOCUST ST. BETWEEN BLUFF AND JENNINGS T33S - R7W - SEC. 24

GROUNDED: DEPTH- 250 Ft. Dia.- 8 In. ANODES: 10 - ANOTEC - 2684

(No., Type, & Mfg.)

CASING: SIZE- 8 In. DEPTH- 40 Ft. COKE BRKEZE: LORESCO SC3 4000 LBS.

(Amount & Mfg.)

CASING CENTRALIZER SPACING: 20' 40'

TO DEPTH- 2-10-2000 COMPLETED- 2-11-2000

12 VOLTS D.C.

DEPTH FT.	DRILLER' LOG	RESISTIVITY OHMS AMPS	ANODE NO.	DEPTH TO ANODE	BEFORE COKE	AFTER COKE
5	TAN SOIL + SANDY SOIL					
10	TAN CLAY + SOME SAND					
15	" " " " + SMALL GRAVEL	40' SCHEDULE 40		TOP OF 8" PVC CASING		
20	" " " " + COARSE SAND	8" CASING IN 14"		CAP 3' 5"		
25	" " " " " "	RODHOUSE CEMENTED		CEMENTED		
30	" " " " " "	IN.		FROM TOP OF COKE		
35	" " " " " " TAN STONE	32 BAGS		TO TOP OF		
40	" " " " " " MORE GRAY CLAY + TAN STONE	↓ WITH 15.4	1" PVC	CASING		
45	RED CLAY + SOME GRAY CLAY	CHLORIDE 200PPM	SOLID	20 BAGS		
50	" " " " " " + SOME RED STONE			WT. 15.7		
55	" " " " " " " "					
60	" " " " " " - GRAY CLAY + SOME STONE					
65	" " " " " " - " " " " + MORE STONE			↓ TOP OF COKE - 62 FT.		
70	" " " " " " - " " " " - RED + GRAY STONE					
75	" " " " " " - " " " " - " " " " " "					
80	" " " " " " - " " " " - " " " " " "					
85	" " " " " " - " " " " - " " " " + MORE RED + GRAY STONE					
90	" " " " " " - " " " " - " " " " " "					
95	RED CLAY - RED STONE - SOME WHITE STONE					
100	" " " " " " " " " " " "				100 - 3.3	
105	" " " " " " " " " " " " GRAY CLAY + SOME RED + GRAY STONE				110 - 3.5	
110	" " " " " " " " " " " " " " " "				120 - 3.7	
115	" " " " " " " " " " " " " " " "				130 - 3.8	
120	" " " " " " " " " " " " " " " "					
125	" " " " " " " " " " " " " " " "					
130	" " " " " " " " " " " " " " " "					
135	" " " " " " " " " " " " " " " "	CHLORIDE 1000 PPM				
140	RED CLAY + GRAY CLAY	450 OHMS		#10-145	140 - 3.9	7.5
145	" " " " " " " " " " " " " " " "		140 FT.			
150	" " " " " " " " " " " " " " " "		ALL WENT	#9-150	150 - 4.5	8.1
155	" " " " " " " " " " " " " " " "		1" PVC	#8-160	160 - 4.4	6.5
160	" " " " " " " " " " " " " " " "			#7-170	170 - 4.5	6.5
165	" " " " " " " " " " " " " " " "			#6-180	180 - 4.9	6.4
170	GRAY CLAY - DARK GRAY + RED STONE					
175	" " " " " " " " " " " " " " " "					
180	GRAY CLAY + GRAY STONE					
185	" " " " " " " " " " " " " " " "	240 OHMS		#5-190	190 - 4.8	6.1
190	" " " " " " " " " " " " " " " "			#4-200	200 - 6.0	10.6
195	" " " " " " " " " " " " " " " "					
200	" " " " " " " " " " " " " " " "					
205	" " " " " " " " " " " " " " " "			#3-210	210 - 6.3	11.9
210	GRAY + RED CLAY - GRAY + RED STONE	CHLORIDE 1500 PPM		#2-220	220 - 6.7	12.0
215	" " " " " " " " " " " " " " " "					
220	GRAY CLAY + GRAY STONE SOME RED CLAY			#1-230	230 - 6.8	11.7
225	" " " " " " " " " " " " " " " "					
230	" " " " " " " " " " " " " " " "	210 OHMS				
235	" " " " " " " " " " " " " " " "					
240	RED + GRAY STONE - SOME CLAY	CHLORIDE 1500 PPM				
245	" " " " " " " " " " " " " " " "					
250	" " " " " " " " " " " " " " " "					

BOREHOLE 172' E. & BLUFF AVE. + 24' N. & LOCUST ST.

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

July 06, 2016

STEVE MITCHELL
Atmos Energy Corporation
1200 11TH AVE
GREELEY, CO 80631

Re: Plugging Application
API 15-077-21380-00-00
ANTHONY 11 8
SW/4 Sec.24-33S-07W
Harper County, Kansas

Dear STEVE MITCHELL:

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 January 06, 2017. 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 January 06, 2017 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