



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
ACD-1 WELL HISTORY
DESCRIPTION OF WELL AND LEASE

Operator: License # 31769
Name: GREELEY GAS COMPANY
Address PENN CENTER SUITE 800
1301 PENNSYLVANIA STREET
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 SWD SLOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

If Workover:
Operator: _____
Well Name: _____

Comp. Date _____ Old Total Depth _____

Deepening Re-perf. Conv. to Inj/SWD
 Plug Back PBTD
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Inj?) Docket No. _____

4/16/97 4/17/97 4/18/97
Spud Date Date Reached TD Completion Date

API NO. 15- 127-205630000

County MORRIS

APP- SW - SW - NW Sec. 14 Twp. 16S Rge. 8 E W

2400' Feet from N (circle one) Line of Section

250" Feet from W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
~~NE~~, ~~SE~~, NW or ~~SW~~ (circle one)

Lease Name COUNCIL GROVE #4 Well # D.W. #5

Field Name _____

Producing Formation _____

Elevation: Ground _____ KB _____

Total Depth 250' PBTD _____

Amount of Surface Pipe Set and Cemented at 80' 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 2000 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 COUNCIL GROVE

Lease Name _____ License No. _____

NE/SW Quarter Sec. 13 Twp. 16 S Rng. 8 E/W

County MORRIS 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 Steve Mitchell

Title CORROSION SPECIALIST Date 4/28/97

Subscribed and sworn to before me this 28th day of April, 1997.

Notary Public Carolyn A. Crable

Date Commission Expires 8-31-2000

K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
C Geologist Report Received

Distribution
 KCC SWD/Rep NGPA
 KGS Plug Other (Specify)

SIDE TWO

Operator Name GREELEY GAS COMPANY

Lease Name COUNCIL GROVE #4 Well # D.W. #5

Sec. 14 Twp. 16S Rge. 8

East

County MORRIS

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 Yes No
(Attach Additional Sheets.)

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No
(Submit Copy.)

List All E.Logs Run:

Log Formation (Top), Depth and Datum Sample

Name Top Datum

"SEE ATTACHED LOG"

"WELL HAS BEEN PRE-PLUGGED"

CASING RECORD <input checked="" type="checkbox"/> New <input type="checkbox"/> 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 SCH. 40	80'	NEAT	37	
			ASTM F480-94				

ADDITIONAL CEMENTING/SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate				
<input type="checkbox"/> Protect Casing				
<input type="checkbox"/> Plug Back TD				
<input type="checkbox"/> Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type		Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated		(Amount and Kind of Material Used)	Depth
	ANODE DEPTHS --	146'	158'	
		170'	182'	
		194'	206'	
		218'	230'	

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No

Date of First, Resumed Production, SWD or Inj. COMPLETION DATE -- 4/18/97	Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
Estimated Production Per 24 Hours	Oil Bbls. Gas Mcf Water Bbls. Gas-Oil Ratio Gravity

Disposition of Gas: **METHOD OF COMPLETION** **Production Interval**

Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled

(If vented, submit ACO-18.) Other (Specify) _____

UNIT NO: RECTIFIER No. 4 WELL No. 5 CITY: COUNCIL GROVE

DATE: 4/16/97

STATE: KANSAS

COUNTY: MORRIS

DISTRICT: KANSAS

TRACTOR: McLEAN'S C.P.

INSPECTOR: TERRY HILLIARD

AFE: # 212895001

APPROPRIATION: # 8301586

LOCATION: T.B.S. - JEFFERSON + HAYS STS. K.C.C. API# 15-127-205630000

GROUND BED: DEPTH- 250 Ft. Dia.- 8 In. ANODES: 8 - ANOTEC 3884

(No., Type, & Mfg.)

CASING: SIZE- 8 In. DEPTH- 80 Ft. COKE BREEZE: LORESCO SC-3/ 3400 LBS. SCHEDULE 40 PVC (Amount & Mfg.)

ASTM F480-94 WELL CASING
 CASING CENTRALIZER SPACING: 78' . 60' . 40' . 20' .
 TO DEPTH - 4/17/97 COMPLETED - 4/19/97

BATTERY VOLTS - 12.8

DEPTH FT.	DRILLER' LOG	RESISTIVITY OHMS	AMPS	ANODE NO.	DEPTH TO ANODE	AMPS BEFORE COKE	AMPS AFTER COKE
5	TAN CLAY	↑		↑		8" PVC CAP	
10	TAN CLAY					3' BELOW GROUND LEVEL	
15	TAN + BLUE CLAY	8" PVC CASING IN 14"					
20	" " " " SOME ROCK CHIPS						
25	TAN, BLUE + GRAY ROCK	BOREHOLE CEMENTED				CEMENT WEIGHT 15.5 LBS. PER GALLON	
30	BLACK SHALE + ROCK						
35	BLACK + TAN " " "	IN.			HOLE PUMPED WITH NEAT CEMENT FROM TOP OF COKE TO TOP OF CASING		
40	BLACK + TAN ROCK	37-94*		1" PVC SOLID			
45	DARK GRAY ROCK + BLUE CLAY	BAGS					
50	" " + TAN ROCK " " "						
55	GRAY + TAN SHALE + ROCK						
60	DARK GRAY + TAN ROCK + SHALE						
65	GRAY + DARK GRAY SHALE						
70	GRAY SHALE - SOME GRAY CLAY						
75	GRAY + BLUE SHALE - TAN ROCK	CHLORIDE 400 PPM					
80	" " " " " "	↓					
85	GRAY SHALE, Rock - WHITE ROCK						
90	" " " " " "						
95	" " " " " "						
100	GRAY SHALE, Rock - SOME GRAY CLAY			*		100 - 2.1	
105	" " " " " "						
110	" " " " " "	500 OHMS			TOP OF COKE	110 - 5.2	
115	" " " " - MORE " "						
120	" " " " - SOME GRAY CLAY					120 - 6.3	
125	" " " " - " " "						
130	GRAY + REDDISH BROWN CLAY - GRAY SHALE			140°			
135	" " " " " "			1" PVC ALL VENT		130 - 7.2	
140	" " " " " "					140 - 6.9	
145	" " " " " "			8	* 146'		10.4
150	BLUE GRAY SHALE - REDDISH BROWN CLAY					150 - 5.3	
155	GRAY SHALE - SOME GRAY CLAY	360 OHMS					
160	" " " " " "			7	* 158'	160 - 5.1	8.2
165	" " " " " "	CHLORIDE 1500 PPM					
170	DARK GRAY SHALE + CLAY			6	* 170'	170 - 6.0	10.2
175	" " " " " "						
180	" " " " " "					180 - 4.2	
185	" " " " " "	400 OHMS		5	* 182'		7.6
190	GRAY CLAY - SOME GRAY SHALE					190 - 7.1	
195	" " " " " "			4	* 194'		10.1
200	" " " " " "					200 - 6.5	
205	" " " " " "			3	* 206'		8.4
210	" " " " " "					210 - 3.2	
215	GRAY CLAY + WHITE CLAY - LITTLE SHALE			2	* 218'		6.1
220	" " " " " "					220 - 5.6	
225	GRAY CLAY - SOME SHALE						
230	" " " " " "	260 OHMS		1	* 230'	230 - 7.0	11.1
235	" " " " " "						
240	" " " " " "						
245	" " " " " "	CHLORIDE 2000 PPM		*	1" PVC		
250	" " " " " "			↓	SOLID		

BOREHOLE IS 161' S. of HAYS ST. 39' E. of JEFFERSON 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 01, 2016

Steve Mitchell
Atmos Energy Corporation
1200 11TH AVE
GREELEY, CO 80631

Re: Plugging Application
API 15-127-20563-00-00
COUNCIL GROVE RECT4 DW5
NW/4 Sec.14-16S-08E
Morris 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 01, 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 01, 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