

Kansas Corporation Commission Oil & Gas Conservation Division

1310782

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 #:		API No.	15						
Name:		If pre 19	If pre 1967, supply original completion date:						
Address 1:		Spot Des	scription:						
Address 2:		Sec Twp S. R East Wes							
City: State:			Feet from North / South Line of Section						
		Feet from East / West Line of Section							
Contact Person:		Footage	s Calculated from Near	est Outside Sectio	n Corner:				
Phone: ()			NE NW	SE SW					
		1				_			
		Lease N	ame:	Well #	:	_			
Check One: Oil Well Gas Well OG	D&A	Cathodic Water	er Supply Well	Other:		_			
SWD Permit #:	ENHR Permit #	:	Gas Storage	Permit #:					
Conductor Casing Size:	_ Set at:		Cemented with:		Sac	cks			
Surface Casing Size:	_ Set at:		Cemented with:		Sac	cks			
Production Casing Size:	_ Set at:		Cemented with: Sa						
List (ALL) Perforations and Bridge Plug Sets:									
Elevation: $(\Box G.L. / \Box K.B.)$ T.D.: Condition of Well: Good Poor Junk in Hole Proposed Method of Plugging (attach a separate page if additional angles).	Casing Leak at:			(Stone Corral Formatio	n)				
Is Well Log attached to this application? Yes No If ACO-1 not filed, explain why:	Is ACO-1 filed?	Yes No							
Plugging of this Well will be done in accordance with K. Company Representative authorized to supervise plugging of	•	•		-	ssion				
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



KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1310782

Form KSONA-1
January 2014
Form Must Be Typed
Form must be Signed
All blanks must be Filled

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 #	Well Location:
Phone: () Fax: () Email Address:	
Surface Owner Information: Name:	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.
the KCC with a plat showing the predicted locations of lease roads, tank	edic Protection Borehole Intent), you must supply the surface owners and k batteries, pipelines, and electrical lines. The locations shown on the plat in the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.
owner(s) of the land upon which the subject well is or will be le	Act (House Bill 2032), I have provided the following to the surface ocated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address.
KCC will be required to send this information to the surface ov	acknowledge that, because I have not provided this information, the vner(s). To mitigate the additional cost of the KCC performing this is of the surface owner by filling out the top section of this form and KCC, which is enclosed with this form.
If choosing the second option, submit payment of the \$30.00 handling form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-	fee with this form. If the fee is not received with this form, the KSONA-1 will be returned.
Submitted Electronically	

STATE CORPORATION COMMISSION OF KANSAS OIL & GAS CONSERVATION DIVISION	API NO. 15
	CountyWilson
MELL COMPLETION OR RECOMPLETION FORM ACO-1 WELL HISTORY	2 26 30 16 K East 2 5ec TwpRge West
The state of the s	••E•• •••• Sec TwpRge West
DESCRIPTION OF WELL AND LEASE	165
7455	2475 Ft West from Southeast Corner of Section
Operator: License # 7465 J.E.B. OIL RESEARCH, INC.	(Note: Locate well in section plat below)
JNG C. Ath Ofract	
Address	Lease NameDickens Northeast well1
City/State/Zip Neodesha, Kansas 66757	
	Field Name
/ Purchaser NA	Producing Formation
	Troducing to mar to tessasses because the second of
Pill D Bosson	Elevation: GroundKB
Operator Contact Person Bill D. Bowen Phone 316/325=2681	Section Plat
Phone	5280
Contractor:License / 6217	4950
Name Caney Valley Drilling Company	4620 4290
,	3960
Weilsite Geologist	3630
Phone	2970
	2640
Designate Type of Completion	LOCCEIVED 1980
New Well Re-Entry Workover STATE	DRPORATION COMMISSION 1650
XXIII SMO Temp Abd	990
Gas Inj Delayed Comp.	MAR 4 3 1985
Dry Other (Core, Water Supply etc.)	ASERVATION DIVISED SAN
If OWNO: old well info as follows:	NSERVATION ASSESS TO THE RESERVE TO
Operator	WATER SUPPLY INFORMATION
Well Name	Disposition of Produced Mater: Disposal
	Docket #
Comp. DateOld Total Depth	i and a seed the
WELL HISTORY Drilling Method:	Questions on this portion of the ACO-1 call:
WELL HISTORY	
WELL HISTORY Drilling Method: Mud Rotary Air Rotary Cable	Questions on this portion of the ACO-1 call: Water Resources Board (913) 296-3717
WELL HISTORY Drilling Method: Mud Rotary Air Rotary Cable 1/10781	Questions on this portion of the ACO-1 call: Mater Resources Board (913) 296-3717 Source of Mater: Division of Water Resources Permit #
WELL HISTORY Drilling Method: Mud Rotary Air Rotary Cable 1/10/81 Spud Date Date Reached TD Completion Date	Questions on this portion of the ACO-1 call: Mater Resources Board (913) 296-3717 Source of Mater: Division of Water Resources Permit #
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Conservation Division 266 N. Main St., Ste. 220 Wichita, KS 67202-1513



Phone: 316-337-6200 Fax: 316-337-6211 http://kcc.ks.gov/

Sam Brownback, Governor

Jay Scott Emler, Chairman Shari Feist Albrecht, Commissioner Pat Apple, Commissioner

August 12, 2016

SHARON WOHLER 3 B Energy, Inc. PO BOX 354 NEODESHA, KS 66757-0354

Re: Plugging Application API 15-205-21584-00-00 DICKENS 1 NE/4 Sec.26-30S-16E Wilson County, Kansas

Dear SHARON WOHLER:

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 February 12, 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 February 12, 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 3