Notice: Fill out COMPLETELY and return to Conservation Division at the address below within 60 days from plugging date.

KANSAS CORPORATION COMMISSION

OIL & GAS CONSERVATION DIVISION

1310912

March 2009 Type or Print on this Form Form must be Signed All blanks must be Filled

Form CP-4

WELL PLUGGING RECORD K.A.R. 82-3-117

OPERATOR: License #:	API No. 15
Name:	Spot Description:
Address 1:	Sec Twp S. R East West
Address 2:	Feet from North / South Line of Section
City: State: Zip: +	Feet from East / West Line of Section
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ()	NE NW SE SW
Type of Well: (Check one) Oil Well Gas Well OG D&A Cathodic Water Supply Well Other: SWD Permit #: SWD Permit #: SWD Permit #: ENHR Permit #: Gas Storage Permit #: Gas Storage Permit #: No Is ACO-1 filed? Yes No If not, is well log attached? Yes No Producing Formation(s): List All (If needed attach another sheet) Depth to Top: Bottom: T.D. T.D.	County: Well #: Well #: Date Well Completed: The plugging proposal was approved on: (Date) by: (KCC District Agent's Name) Plugging Commenced:
Depth to Top: Bottom: T.D	Plugging Completed:
Depth to Top: Bottom:T.D	

Show depth and thickness of all water, oil and gas formations.

Oil, Gas or Water Records		Casing Record (Surface, Conductor & Production)			
Formation	Content	Casing	Size	Setting Depth	Pulled Out

Describe in detail the manner in which the well is plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. If cement or other plugs were used, state the character of same depth placed from (bottom), to (top) for each plug set.

Plugging Contractor License #:		Name:	
Address 1:		Address 2:	
City:		State:	Zip: +
Phone: ()			
Name of Party Responsible for Plug	ging Fees:		
State of	County,	, SS.	
	(Print Name)	Employee of Operato	r or Operator on above-described well,

being first duly sworn on oath, says: That I have knowledge of the facts statements, and matters herein contained, and the log of the above-described well is as filed, and the same are true and correct, so help me God.



KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

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 wit				
OPERATOR: License #:		API No. 15 - 15-0	011-2382	8-00-00	
Name: Running Foxes Petroleum Inc.		If pre 1967, supply or	iginal complet	tion date:	
Address 1:6855 S HAVANA ST, STE 400		Spot Description:			
			Sec. <u>36</u> Twp.	<u>24</u> S. R. <u>23</u>	
City: CENTENNIAL State: CO	Zip: 80112 +		Feet from	North / 🖌 South	
Contact Person: Joe Taglieri			Feet from	East / 🗹 West	Line of Section
Phone: (303) _617-7242		Footages Calculated		Outside Section Corn SE V SW	er:
		County: Bourbo		SE 500	
		Lease Name: Wur		Well #:11-	36A INJ3
Check One: Oil Well Gas Well OG	D&A Cathod		ll Oth	ner:	
SWD Permit #:	ENHR Permit #: E30	085.74 G	as Storage F	Permit #:	
Conductor Casing Size:	Set at:	Cemented v	vith:		Sacks
Surface Casing Size:8.625	Set at: 21	Cemented v	vith: <u>5</u>		Sacks
Production Casing Size: 2.875	Set at:491	Cemented v	vith: 75		Sacks
List (ALL) Perforations and Bridge Plug Sets:					
Attached					
Elevation: <u>863</u> (G.L. / C.B.) T.D.: <u>500</u>	PBTD: A	nhydrite Depth:		ne Corral Formation)	
Condition of Well: 🗹 Good 🗌 Poor 🗌 Junk in Hole			(310	ne Corrai Formation)	
Proposed Method of Plugging (attach a separate page if addition		nterval)			
Plug well from TD to surface with Port	land Cement.				
Is Well Log attached to this application?	Is ACO-1 filed? 🖌 Yes	Νο			
If ACO-1 not filed, explain why:					
i Add- i fid filed, explain why.					
Plugging of this Well will be done in accordance with K.S.	A. 55-101 et. seq. and the Rul	es and Regulations of the	e State Corpo	ration Commission	
Company Representative authorized to supervise plugging op	erations. Chuck Hutton				
	City:	Fort Scott	State: KS	Zip:66701	_+
Phone: (<u>620</u>) <u>829-5307</u>	City:				_ +
	City:				_+
Phone: (<u>620</u>) <u>829-5307</u>	City:	_{e:} _CST Oil & Gas	Corporati	on	_ +
Phone: (<u>620</u>) 829-5307 Plugging Contractor License #: <u>34430</u> Address 1: <u>6955 S Havana St Ste 400</u>	City:	e: CST Oil & Gas	Corporati	on	
Phone: (<u>620</u>) 829-5307 Plugging Contractor License #: <u>34430</u> Address 1: <u>6955 S Havana St Ste 400</u>	City: Nam Addr	e: CST Oil & Gas	Corporati	on	
Phone: (<u>620</u>) 829-5307 Plugging Contractor License #: <u>34430</u> Address 1: <u>6955 S Havana St Ste 400</u> City: CENTENNIAL	City: Nam Addr	e: CST Oil & Gas	Corporati	on	
Phone: (<u>620</u>) 829-5307 Plugging Contractor License #: 34430 Address 1: 6955 S Havana St Ste 400 City: CENTENNIAL Phone: (<u>303</u>) 617-7531	City: Nam Addr	e: CST Oil & Gas	Corporati	on	

Submitted Electronically



KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

CERTIFICATION OF COMPLIANCE WITH THE KANSAS SURFACE OWNER NOTIFICATION ACT

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

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:Running Foxes Petroleum Inc.	Well Location:
Address 1:6855 S HAVANA ST, STE 400	County: Bourbon Lease Name: Wunderly Well #: 11-36A INJ3
City: CENTENNIAL State: CO Zip: 80112 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:
Surface Owner Information: Name: Michael Wunderly Address 1: 1749 145th St. Address 2:	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.

Submitted Electronically

I

1304317

Form	CP1 - Well Plugging Application
Operator	Running Foxes Petroleum Inc.
Well Name	Wunderly 11-36A INJ3
Doc ID	1304317

Perforations And Bridge Plug Sets

Perforation Top	Perforation Base	Formation	Bridge Plug Depth
433	440	Bartlesville	

Conservation Division 266 N. Main St., Ste. 220 Wichita, KS 67202-1513 Kansas Corporation Commission

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 19, 2016

Joe Taglieri Running Foxes Petroleum Inc. 6855 S HAVANA ST, STE 400 CENTENNIAL, CO 80112

Re: Plugging Application API 15-011-23828-00-00 Wunderly 11-36A INJ3 SW/4 Sec.36-24S-23E Bourbon County, Kansas

Dear Joe Taglieri:

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