

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1313491

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

Name:       If pre 1967, supply original completion date:         Address 1:       Spot Description:         Address 2:		•	ted with this form.		lion Act,		
Address 1:   Address 2:   City:   State:   Zip:   +   Contact Person:   Phone: ()   Check One:   Oil Well   Gas Well   OC   D&A   Cathodic   Water Supply Well   Other:   SWD   Permit #:   Ontuctor Casing Size:   Switze:   Set at:   Conductor Casing Size:   Switze:   Set at:   Conductor Casing Size:   Switze:   Set at:   Conductor Casing Size:   Set at:   Conductor Melli   Good Poor   Junk in Hole </th <th colspan="3" rowspan="5">Name:        </th> <th colspan="4" rowspan="2">API No. 15</th>	Name:			API No. 15			
Address 1:							
Address 2:				scription:			
City:				Sec Tv	wp S. R	East West	
Contact Person:				Feet from	North / S	South Line of Section	
Phone: ( )							
County:						Corner:	
Lease Name:       Well #         Check One:       Oil Well       Gas Well       OG       D&A       Cathodic       Water Supply Well       Other:	none: ( )						
Check One:       Oil Well       Gas Well       OG       D&A       Cathodic       Water Supply Well       Other:							
SWD       Permit #:			Lease Na	ame:	Vveii #: .		
SWD       Permit #:		D&A	Cathodic Wate	er Supply Well	Other:		
Conductor Casing Size:       Set at:       Cemented with:         Surface Casing Size:       Set at:       Cemented with:         Production Casing Size:       Set at:       Cemented with:         Production Casing Size:       Set at:       Cemented with:         List (ALL) Perforations and Bridge Plug Sets:       Cemented with:       Cemented with:         Elevation:       (I_GL/_K&) TD:       PBTD:       Anhydrite Depth:         Condition of Well:       Good       Poor       Junk in Hole       Casing Leak at:       (Stone Correl Formet         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 Neell Log attached to this application?       Yes       No         If ACO-1 not filed, explain why:       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 Comm       Company Representative authorized to supervise plugging operations:       Address:       Zip:       Phone:       Zip:       Zip:       City:       State:       Zip:       Zip:       City:       State:       Zip:       Zip:       City:       State:							
Surface Casing Size:       Set at:       Cemented with:         Production Casing Size:       Set at:       Cemented with:         List (ALL) Perforations and Bridge Plug Sets:         Elevation:       (] @L./ [KB.] T.D.:       PBTD:         Anhydrite Depth:       (Stone Correl Formet         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):       (Interval)         Is Well Log attached to this application?       Yes       No         If ACO-1 not filed, explain why:       Seq. and the Rules and Regulations of the State Corporation Comm         Company Representative authorized to supervise plugging operations:							
Production Casing Size:							
List ( <i>ALL</i> ) Perforations and Bridge Plug Sets:  Elevation:(	-						
Elevation:       (		Set al					
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 Comm         Company Representative authorized to supervise plugging operations:         Address:	roposed Method of Plugging (attach a separate page if additio	nal space is needed):	(Interval)		Store Conarronnauon)		
Company Representative authorized to supervise plugging operations:	ACO-1 not filed, explain why:						
Phone: ( )			· ·		•		
Plugging Contractor License #:       Name:	ddress:		_ City:	State:	Zip:	+	
Address 1:       Address 2:         City:       State:       Zip:	hone: ()		- -				
Address 1:       Address 2:         City:       State:       Zip:	lugging Contractor License #:		_ Name:				
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

OIL & GAS CONSERVATION DIVISION CERTIFICATION OF COMPLIANCE WITH THE KANSAS SURFACE OWNER NOTIFICATION ACT	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 Protect T-1 (Request for Change of Operator Transfer of Injection or Surface Pit Permit); and CP-1 (Well F Any such form submitted without an accompanying Form KSONA-1 will be return	Plugging Application).
Select the corresponding form being filed: C-1 (Intent) CB-1 (Cathodic Protection Borehole Intent) T-1 (Trans	sfer) CP-1 (Plugging Application)
OPERATOR: License # Well Location:	

KANSAS CORPORATION COMMISSION

131349

Form KSONA-1

	Weil Location.
Name:	
Address 1:	County:
Address 2:	Lease Name: Well #:
City: State: Zip:+	<b>3</b> · · · · · · · · · · · · · · · · · · ·
Contact Person:	the lease below:
Phone: ( ) Fax: ( )	
Email Address:	
Surface Owner Information:	
Name:	· · · · · · · · · · · · · · · · · · ·
Address 1:	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
Address 2:	county, and in the real estate property tax records of the county treasurer.
City: State: Zip:+	

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

Form	CP1 - Well Plugging Application		
Operator	CMX, Inc.		
Well Name	STEPHENSON 1-9		
Doc ID	1313491		

Perforations And Bridge Plug Sets

Perforation Top	Perforation Base	Formation	Bridge Plug Depth
4887	4890	Simpson	

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

August 04, 2016

Leah Kasten CMX, Inc. 1700 N WATERFRONT PKWY BLDG 300B WICHITA, KS 67206

Re: Plugging Application API 15-007-22970-00-00 STEPHENSON 1-9 NE/4 Sec.09-31S-11W Barber County, Kansas

Dear Leah Kasten:

The Conservation Division has received your Well Plugging Application (CP-1).

Under K.A.R. 82-3-113(b)(2), you must notify DISTRICT 1 of your proposed plugging plan at least 5 days before plugging the well. DISTRICT 1's phone number is (620) 225-8888. Failure to notify DISTRICT 1, 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 04, 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 04, 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 1