



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

Form	CP1 - Well Plugging Application
Operator	Pintail Petroleum, Ltd.
Well Name	KLEEMAN 2 A
Doc ID	1313561

Perforations And Bridge Plug Sets

Perforation Top	Perforation Base	Formation	Bridge Plug Depth
1671	1760	Cedar Hills	1850

ORIGINAL

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

Form ACO-1
September 1999
Form Must Be Typed

Operator: License # 5086
 Name: Pintail Petroleum, Ltd. **RECEIVED**
 Address: 225 N. Market, Ste. 300 **MAY 04 2004**
 City/State/Zip: Wichita, KS 67202
 Purchaser: BP America **KCC WICHITA**
 Operator Contact Person: Walter Innes Phillips
 Phone: (316) 263-2243
 Contractor: Name: Cheyenne Drilling
 License: 5382
 Wellsite Geologist: Ron Osterbuhr
 Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SIOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)
 If Workover/Re-entry: Old Well Info as follows:
 Operator: _____
 Well Name: _____
 Original Comp. Date: _____ Original Total Depth: _____
 Deepening Re-perf. Conv. to Enhr./SWD
 Plug Back _____ Plug Back Total Depth _____
 Commingled _____ Docket No. _____
 Dual Completion _____ Docket No. _____
 Other (SWD or Enhr.?) _____ Docket No. _____
 11/24/03 11/26/03 12/6/03
 Spud Date or Date Reached TD Completion Date or
 Recompletion Date Recompletion Date

API No. 15 - 093-21744 - 00-00
 County: Kearny
 S/2 - SW - _____ Sec. 36 Twp. 22 S. R. 36 East West
660 feet from S / N (circle one) Line of Section
3960 feet from E / W (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE NW SW
 Lease Name: Kleeman Unit Well #: 2A
 Field Name: _____
 Producing Formation: Chase
 Elevation: Ground: 3182 Kelly Bushing: 3188
 Total Depth: 2720 Plug Back Total Depth: 2535
 Amount of Surface Pipe Set and Cemented at 327 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.
ALT II JAH 11-16-04
 Drilling Fluid Management Plan
 (Data must be collected from the Reserve Pit)
 Chloride content 10,000 ppm Fluid volume _____ bbls
 Dewatering method used evaporate and backfill
 Location of fluid disposal if hauled offsite: _____
 Operator Name: _____
 Lease Name: _____ License No.: _____
 Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
 County: _____ 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 of 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: Bell A. Ibern
 Title: Geologist Date: 5/3/04
 Subscribed and sworn to before me this 3rd day of May,
20 04.
 Notary Public: Patricia C. Byerlee
 Date Commission Expires: 12/11/2005

KCC Office Use ONLY
 Letter of Confidentiality Received
 If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution



X

Operator Name: Pintail Petroleum, Ltd. Lease Name: Kleeman Unit Well #: 2A
 Sec. 36 Twp. 22 S. R. 36 East West County: Kearny

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems 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 test, along with final chart(s). Attach extra sheet if more space is needed. Attach copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

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:

<input type="checkbox"/> Log	Formation (Top), Depth and Datum	<input checked="" type="checkbox"/> Sample
Name	Top	Datum
B/ Stone Corral	2117	+1071
Hollenberg	2585	+ 604
Herington	2616	+ 572
Krider	2653	+ 535
Winfield	2680	+ 508

CASING RECORD <input 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	12-1/4"	8.625	24#	327'	Lite & common	150	
Production	7-3/4"	5-1/2'	14#	2700'	Lite	520	Pozmix

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 Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth

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MAY 9 4 2004
KCC WICHITA

TUBING RECORD		Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr.	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 Vented Sold Used on Lease (If vented, Submit ACO-18.)

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled Other (Specify)

Production Interval _____



SALES OFFICE:
 100 S. Main
 Suite #607
 Wichita KS 67202
 (316) 262-3699
 (316) 262-5799 FAX

SALES & SERVICE OFFICE:
 10244 NE Hiway 61
 P.O. Box 8613
 Pratt, KS 67124-8613
 (620) 672-1201
 (620) 672-5383 FAX

SALES & SERVICE OFFICE:
 1700 S. Country Estates Rd.
 P.O. Box 129
 Liberal, KS 67905-0129
 (620) 624-2277
 (620) 624-2280 FAX

Invoice

Bill to:			7071790	Invoice	Invoice Date	Order	Order Date
PINTAIL PETROBUM LTD 225 N MARKET #300 WICHITA, KS 67202				311108	11/28/03	7238	11/24/03
Service Description							
Cement							
				Lease		Well	
				Kleeman		2-A	
AFE	CustomerRep	Treater		Well Type	Purchase Order	Terms	
	N Perez	B Drake		New Well		Net 30	
ID.	Description	UOM	Quantity	Unit Price	Price		
D200	COMMON	SK	50	\$10.39	\$519.50 (T)		
D206	A-SERV LITE (COMMOM)	SK	150	\$8.65	\$1,297.50 (T)		
C310	CALCIUM CHLORIDE	LBS	472	\$0.75	\$354.00		
C194	CELLFLAKE	LB	44	\$2.00	\$88.00		
E107	CEMENT SERVICE CHARGE	SK	200	\$1.50	\$300.00		
E100	HEAVY VEHICLE MILEAGE - 1 WAY	MI	90	\$3.25	\$292.50		
E104	PROPPANT / BULK DELIV SERVICES/TON MILE, \$200 MIN	TM	779	\$1.30	\$1,012.70		
R201	CASING CEMENT PUMPER, 301-500' 1ST 4 HRS ON LOC.	EA	1	\$704.00	\$704.00		
R701	CEMENT HEAD RENTAL	EA	1	\$250.00	\$250.00		

Sub Total: \$4,818.20

Discount: \$1,445.92

Discount Sub Total: \$3,372.28

Kearny County & State Tax Rate: 5.30% **Taxes:** \$67.40
 (T) Taxable Item

Total: \$3,439.68

RECEIVED
 MAY 04 2004
 KCC WICHITA

PLEASE REMIT TO Acid Services, LLC, Dept No 1131, Tulsa, OK 74182

Accounts become past due the last day of the month following billing. Interest rate 1.5% per month (18% per year) on past due accounts.



RECEIVED
MAY 04 2004
KCC WICHITA

SALES OFFICE:
100 S. Main
Suite #607
Wichita KS 67202
(316) 262-3699
(316) 262-5799 FAX

SALES & SERVICE OFFICE:
10244 NE Hiway 61
P.O. Box 8613
Pratt, KS 67124-8613
(620) 672-1201
(620) 672-5383 FAX

SALES & SERVICE OFFICE:
1700 S. Country Estates Rd.
P.O. Box 129
Liberal, KS 67905-0129
(620) 624-2277
(620) 624-2280 FAX

Invoice

Bill to:		7071790	Invoice	Invoice Date	Order	Order Date
PINTAIL PETROLEUM LTD 225 N MARKET #300 WICHITA, KS 67202			311101	11/28/03	7240	11/25/03
Service Description						
Cement						
Lease				Well		
Kleeman				2-A		
AFE	CustomerRep	Treater	Well Type	Purchase Order	Terms	
	R Osterbuhr	B Drake	New Well		Net 30	

ID.	Description	UOM	Quantity	Unit Price	Price
D204	50/50 POZ (COMMON)	SK	50	\$6.84	\$342.00 (T)
D206	A-SERV LITE (COMMOM)	SK	470	\$8.65	\$4,065.50 (T)
C195	FLA-322	LB	32	\$7.50	\$240.00
C221	SALT (Fine)	GAL	291	\$0.25	\$72.75
C310	CALCIUM CHLORIDE	LBS	1227	\$0.75	\$920.25
C243	DEFOAMER	LB	9	\$3.00	\$27.00
C194	CELLFLAKE	LB	113	\$2.00	\$226.00
C311	CAL SET	LBS	210	\$0.54	\$113.40
C302	MUD FLUSH	GAL	500	\$0.75	\$375.00
F101	TURBOLIZER, 5 1/2"	EA	10	\$71.00	\$710.00 (T)
F191	GUIDE SHOE-REGULAR, 5 1/2"	EA	1	\$185.00	\$185.00 (T)
F231	FLAPPER TYPE INSERT FLOAT VALVES, 5 1/2"	EA	1	\$165.00	\$165.00 (T)
F143	TOP RUBBER CEMENT PLUG, 5 1/2"	EA	1	\$70.00	\$70.00 (T)
F800	THREADLOCK COMPOUND KIT	EA	1	\$30.00	\$30.00 (T)
E107	CEMENT SERVICE CHARGE	SK	520	\$1.50	\$780.00
E100	HEAVY VEHICLE MILEAGE - 1 WAY	MI	80	\$3.25	\$260.00
E104	PROPPANT / BULK DELIV SERVICES/TON MILE, \$200 MIN	TM	1804	\$1.30	\$2,345.20
R206	CASING CEMENT PUMPER, 2501-3000' 1ST 4 HRS ON LOC	EA	1	\$1,533.00	\$1,533.00
R701	CEMENT HEAD RENTAL	EA	1	\$250.00	\$250.00

Sub Total: \$12,710.10

Discount: \$4,194.33

Discount Sub Total: \$8,515.77

Kearny County & State Tax Rate: 5.30% Taxes: \$197.70

PLEASE REMIT TO Acid Services, LLC, Dept No 1131, Tulsa, OK 74182

Accounts become past due the last day of the month following billing. Interest rate 1.5% per month (18% per year) on past due accounts.

Pintail Petroleum, Ltd.
225 N. Market, Suite 300
Wichita, KS 67202
316-263-2243
1-800-554-9347
316-263-6479 (Fax)

July 20, 2016

Kansas Corp Commission
256 N Main St. Ste. 220
Wichita KS 67202

Re: Kleeman 2A Temporary Status 3 year extension

To whom it may concern:

We are going to plug and abandon the Kleeman 2A and so withdraw our request for the three year extension.

There is a crop of milo growing in the field where the well is located so we will wait for it the milo to be harvested and then will move in and plug the well

Sincerely,



Karen Houseberg

Cc:

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 10, 2016

Karen Houseberg
Pintail Petroleum, Ltd.
225 N MARKET STE 300
WICHITA, KS 67202-2024

Re: Plugging Application
API 15-093-21744-00-01
KLEEMAN 2 A
S/2 Sec.36-22S-36W
Kearny County, Kansas

Dear Karen Houseberg:

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 10, 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 10, 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