

# Kansas Corporation Commission Oil & Gas Conservation Division

1316692

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. 1	API No. 15										
Name:		If pre 196	7, supply original comple	etion date:									
Address 1:		Spot Des	cription:										
Address 2:		_	Sec Twp S. R[										
City: State:			Feet from	North / South	Line of Section								
Contact Person:			Feet from	East / West	Line of Section								
Phone: ( )		Footages	Calculated from Neares	_	ner:								
Filone. ( )		0.00000	NE NW	SE SW									
			me:										
		Lease Na	ine.	vveii #									
Check One: Oil Well Gas Well OG	D&A Cat	thodic Water	Supply Well Of	ther:									
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								
Elevation: ( G.L. / K.B.) T.D.:  Condition of Well: Good Poor Junk in Hole  Proposed Method of Plugging (attach a separate page if addit  Is Well Log attached to this application? Yes No	Casing Leak at:tional space is needed):			itone Corral Formation)									
Plugging of this Well will be done in accordance with K. Company Representative authorized to supervise plugging													
Address:	(	City:	State:	Zip:	_+								
Phone: ( )													
Plugging Contractor License #:		Name:											
Address 1:	<i>F</i>	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

692

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 (Ca	athodic Protection Borehole Intent) T-1 (Transfer) CP-1 (Plugging Application)
OPERATOR: License #	Well Location:
Name:	SecTwpS. R 🗌 East 🗌 West
Address 1:	County:
Address 2:	Lease Name: Well #:
City:	If filing a Form T-1 for multiple wells on a lease, enter the legal description of
Contact Person:	the lease below:
Phone: ( ) Fax: ( )	
Email Address:	
Surface Owner Information:	
Name:	When filing a Form T-1 involving multiple surface owners, attach an additional
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:	
owner(s) of the land upon which the subject well is or will be loc CP-1 that I am filing in connection with this form; 2) if the form be	batteries, pipelines, and electrical lines. The locations shown on the plat the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.  et (House Bill 2032), I have provided the following to the surface cated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form eing 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, an	d email address.
KCC will be required to send this information to the surface owr	knowledge that, because I have not provided this information, the ner(s). To mitigate the additional cost of the KCC performing this of the surface owner by filling out the top section of this form and CC, 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-1	
Submitted Electronically	

Form	CP1 - Well Plugging Application
Operator	Colt Energy Inc
Well Name	SHAFER 1
Doc ID	1316692

# Perforations And Bridge Plug Sets

Perforation Top	Perforation Base	Formation	Bridge Plug Depth
0	9999	NONE	

1000

<del>=</del>

# WELL LOG BUREAU, KANSAS GEOLOGICAL SOCIETY UNION NATIONAL BANK BLDG, WICHITA, KANSAS

SEC23 T 26 R 14 E.		Darman Land		- 63		Tomas de la compania del compania del la compania del compania de la compania de la compania del compania d	-
SEC23 T	Woodson			. 28, 1927.			
rom SW cor NW/4	NO. 1 COUNTY Woodson			COMPLETED Feb. 28, 1927.	QUARTS BETWEEN	2	
LOCATION 220' Each way from SW cor NW/4	FARM Schafer	COMPANY R. L. Bringar,	CONTRACTOR R. L. Brinegar.	COMMENCED Feb. 3, 1927.	SHOT	CORRESPONDENCE REGARDING THIS WELL SHOULD BE REFERRED TO	
CASING RECORD		814 980	151-2 65-8 1046	12 1-2 5 3-16	TOTAL DEPTH 1426*	CORRESPONDENCE REGARDIN	

FIGURES INDICATE BOTTOM OF FORMATIONS. REMARKS 8-20-27.

ELEVATION INITIAL PRODUCTION

Ban. T. N. M. 937 Dry.

925 Surv.

Depth	1019	1033	1040	1044	1046	1050	1075	1110	1113	1145	1160	1190	1197	1228	1231	1	1240	1263	1271	1285	1348	1353	1363	1383	1426										ral				
Formation	lime	state black lime hard	slate		shale lt	lime	sand	shale It.	lime	shale 1t.		shale 1t		shale drk	(T	(Steel line O. N. )	shale sandy	sand		shale white	shale gray		shale sandy	shale drk	lime Miss.	(Steel lime O. K.)	Water at 14201.		Abandoned.		qt.								
Depth	ωα	196	245	249	290	300	340	344	350	370	385	396	415	470	485	493	498	505	531	-	621	626	635	657	099	698	800	810	820	822	835	850	895		050	955	960	1001	1001
Formation	sand gravel	shale	lime	shale	lime	shale	lime	shale	lime	lime & shale	shale d <mark>rk</mark>	c	lime & shale		shale sandy				shale white	lime Water at 6001	shale light	lime Water	shale	lime	slate black Water	lime	shale	lime	shale		shale light	lime	shale light	sand (Water at 9251)	shale		shale drk	11110	Spare It.

Han & maly 220F4L 1320

Lines 4180FSL 3 Sect. 5060 Lives

SAMC AS

16

- No Plugg Reid @ 12C 2.16. Recids 10 9

except +4:5

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

September 13, 2016

REX R. ASHLOCK Colt Energy Inc PO BOX 388 IOLA, KS 66749-0388

Re: Plugging Application API 15-207-02775-00-00 SHAFER 1 NW/4 Sec.23-26S-14E Woodson County, Kansas

Dear REX R. ASHLOCK:

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 March 13, 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 March 13, 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