



KANSAS CORPORATION COMMISSION 1325196
OIL & GAS CONSERVATION DIVISION

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 #: _____
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

I

Form	CP1 - Well Plugging Application
Operator	Gore Oil Company
Well Name	MUNSTERMANN 3
Doc ID	1325196

Perforations And Bridge Plug Sets

Perforation Top	Perforation Base	Formation	Bridge Plug Depth
4103	4109	Lansing	
4055	4058	Lansing	



DUAL SPACED NEUTRON LOG

CASED HOLE

COMP. GORE OIL COMPANY	COMPANY GORE OIL COMPANY						
WELL MUNSTERMANN NO. 1	WELL MUNSTERMANN NO. 3						
FIELD	FIELD						
COUNTY RAWLINS	COUNTY RAWLINS		STATE KANSAS		COUNTY RAWLINS ST. KANSAS		
SEC. 19	TWP. 1S	RGE. 32W	COUNTY RAWLINS STATE KANSAS		API NO.		
PERMANENT DATUM GROUND LEVEL ELEV. 3035			ELEV.: K.B. 3040		OTHER SERVICES		
LOG MEASURED FROM 5 FT. ABOVE PERM. DATUM			D.F.		PERF		
DRILLING MEASURED FROM KELLY BUSHING			G.L. 3035				
DATE	10/12/89						
RUN NO.	ONE						
DEPTH-DRILLER	4264						
DEPTH-LOGGER	4263						
BTM. LOG INTER.	4252						
TOP LOG INTER.	3700						
TYPE FLUID IN HOLE	WATER						
SALINITY PPM NACL	NA						
DENSITY	NA						
LEVEL	FULL						
MAX REC TEMP	118						
OPERATING RIG TIME	1.5 HRS						
EQUIPMENT: LOCATION	4544 :GT. BEND						
RECORDED BY	FRANK MAYERS						
WITNESSED BY	MR. BATES						
TIME@MAX DPTH REACH							
RUN		BOREHOLE RECORD			CASING AND TUBING RECORD		
NO.	BIT	FROM	TO	SIZE	WGT.	FROM	TO
ONE	12.25	0	301	8.625		0	301
TWO	7.875	301	4300	4.55		0	4299

FOLD HERE

SERVICE TICKET NO.: 17500 API SERIAL NO.: EQUIPMENT DATA LOGGING DATA NEUTRON TEMPERATURE

GAMMA		NEUTRON		TEMPERATURE	
RUN NO.	ONE	RUN NO.	ONE	RUN NO.	
SERIAL NO.	102534	SERIAL NO.	102534	SERIAL NO.	
MODEL NO.	265A	MODEL NO.	265A	MODEL NO.	
DIAMETER	3.375	DIAMETER	3.375	DIAMETER	
DETECTOR MODEL NO.	265A	LOG TYPE	NEU-NEU		
TYPE	SCINT	SOURCE TYPE	AM-241/B		
LENGTH	4 IN	SERIAL NO.	D9N-89		
DISTANCE TO SOURCE		STRENGTH	18.5 CI		

GENERAL				GAMMA				TEMPERATURE				NEUTRON					
RUN NO.	4263	DEPTH	3700	SPEED	FREE	TOOL POSITION	FREE	TC/FL	1.75	L	R	TC/FL	1.25	L	R	SCALE	-10
FROM		TO		FT./MIN.		FREE											
TIME		MARKS															

REMARKS: CREW: F.D. MAYERS, B.B. BRIAND, R. ROME

HALLIBURTON LOGGING SERVICES, INC. DOES NOT GUARANTEE THE ACCURACY OF ANY INTERPRETATION OF LOG DATA. CONVERSION OF LOG DATA TO PHYSICAL ROCK PARAMETERS OR RECOMMENDATIONS WHICH MAY BE GIVEN BY HLS PERSONNEL OR WHICH MAY APPEAR ON THE LOG OR IN ANY OTHER FORM. ANY USER OF SUCH DATA, INTERPRETATIONS, OR RECOMMENDATIONS AGREES THAT HLS IS NOT RESPONSIBLE, EXCEPT WHERE DUE TO GROSS NEGLIGENCE OR WILLFUL MISCONDUCT FOR ANY LOSS, DAMAGES OR EXPENSES RESULTING FROM THE USE THEREOF.

O. COLLAR LOCATOR	30.
	NEUTRON POROSITY % CLIM

NEUTRON POROSITY
% CLIM

30.



3700

3750

3800

3850

3900

COLLAR LOCATOR

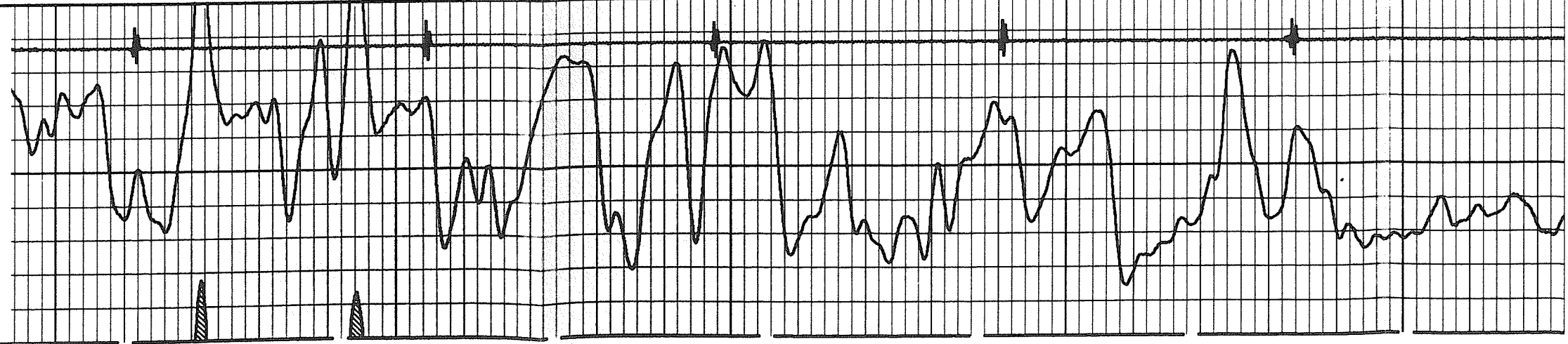
10.

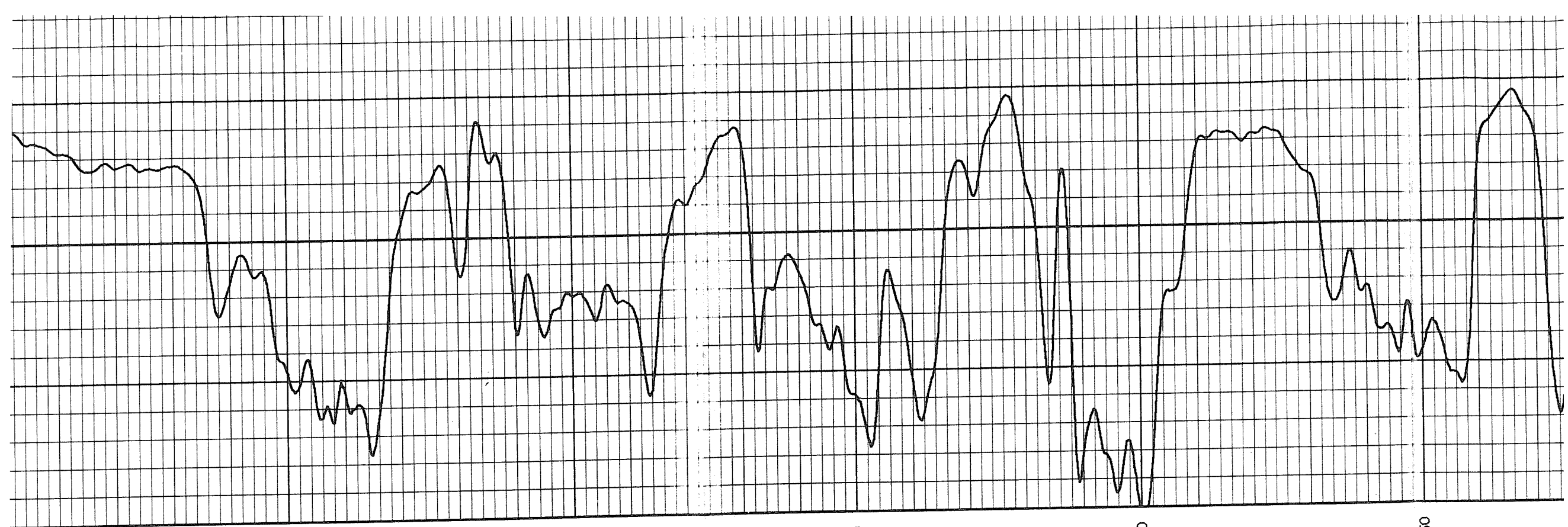
0.

GAMMA #1
API

0.

120.





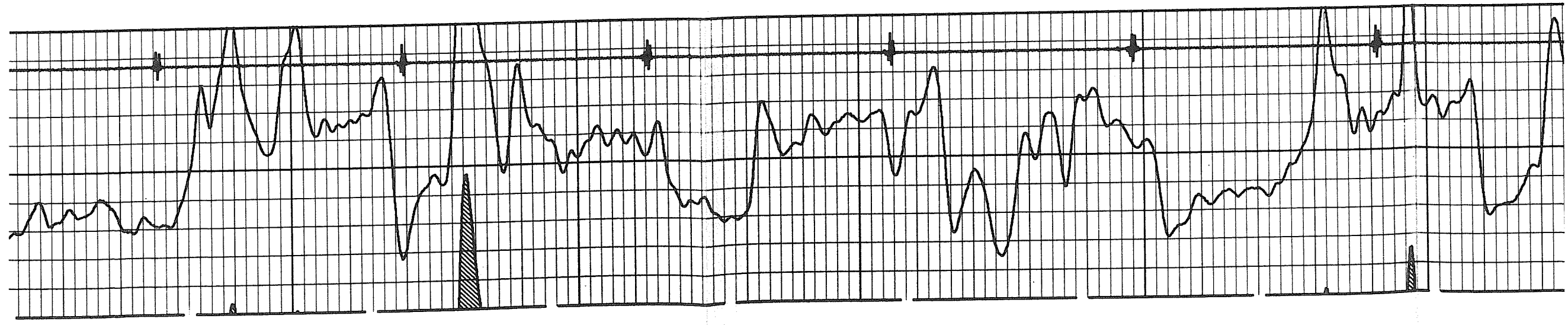
3950

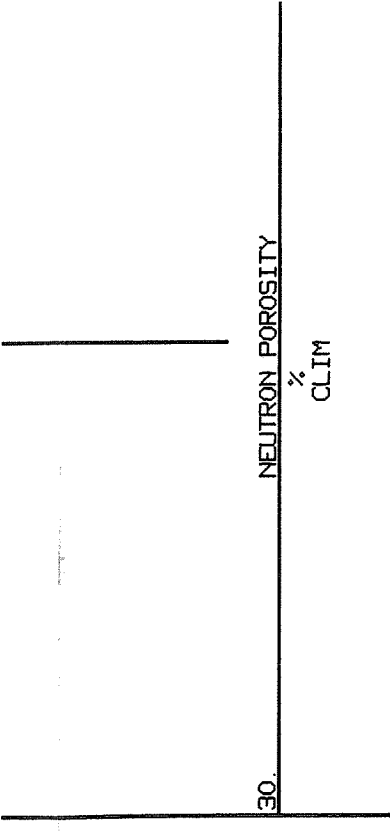
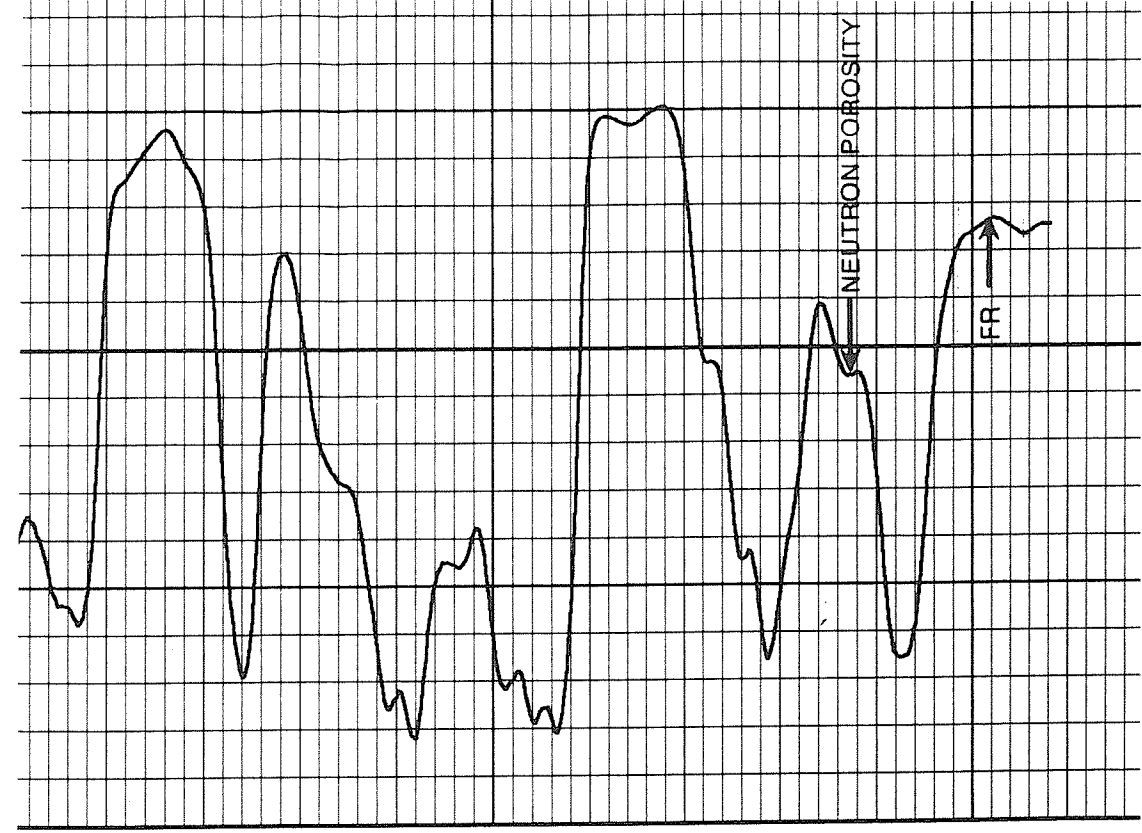
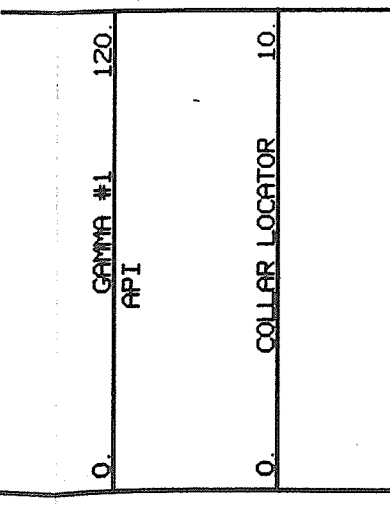
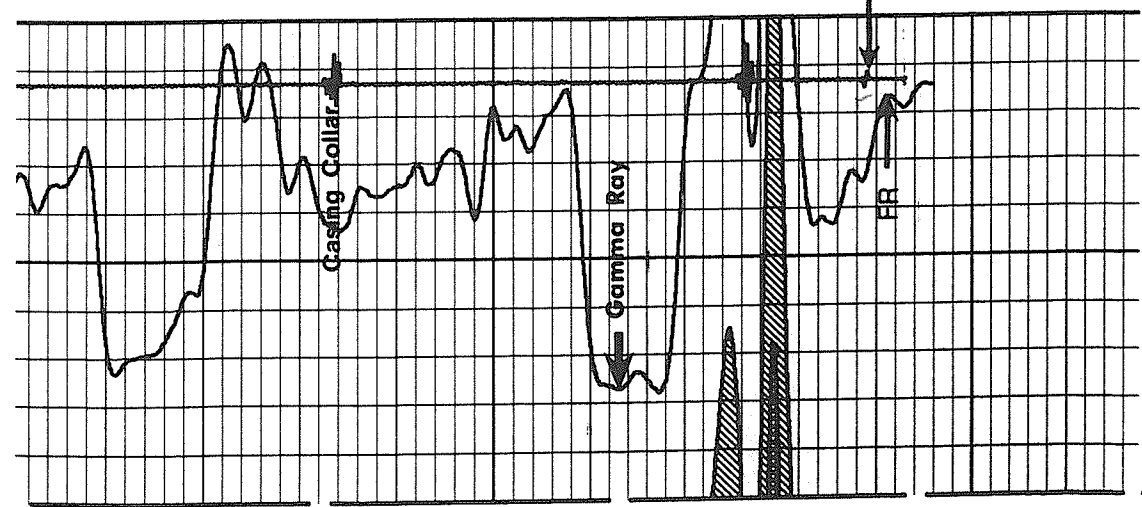
4000

4050

4100

4150



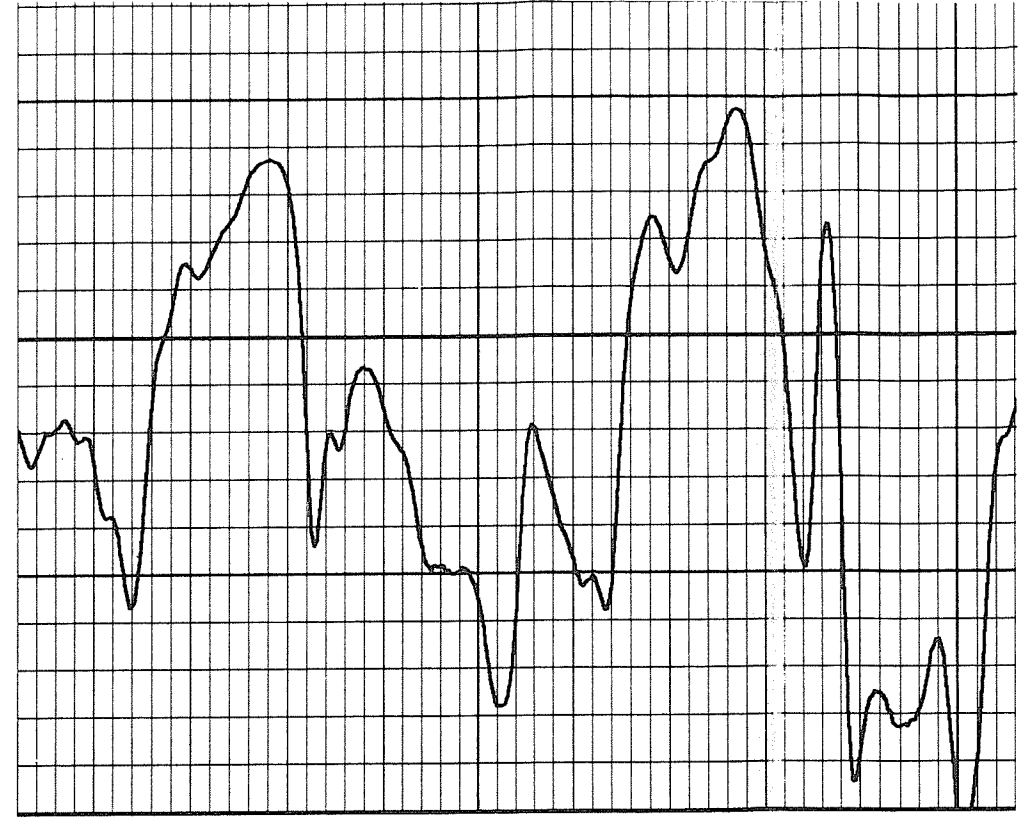
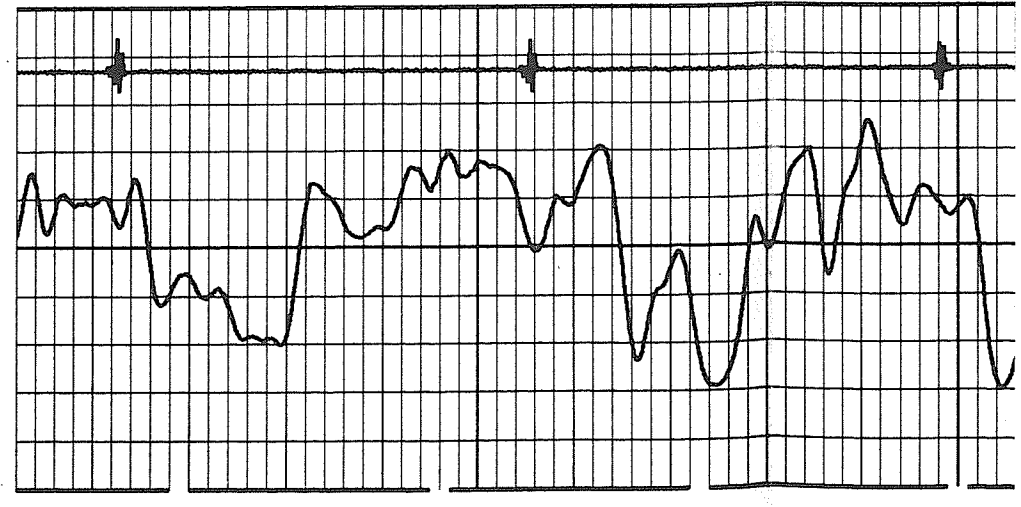


4200

FR

4250

REPEAT SECTION



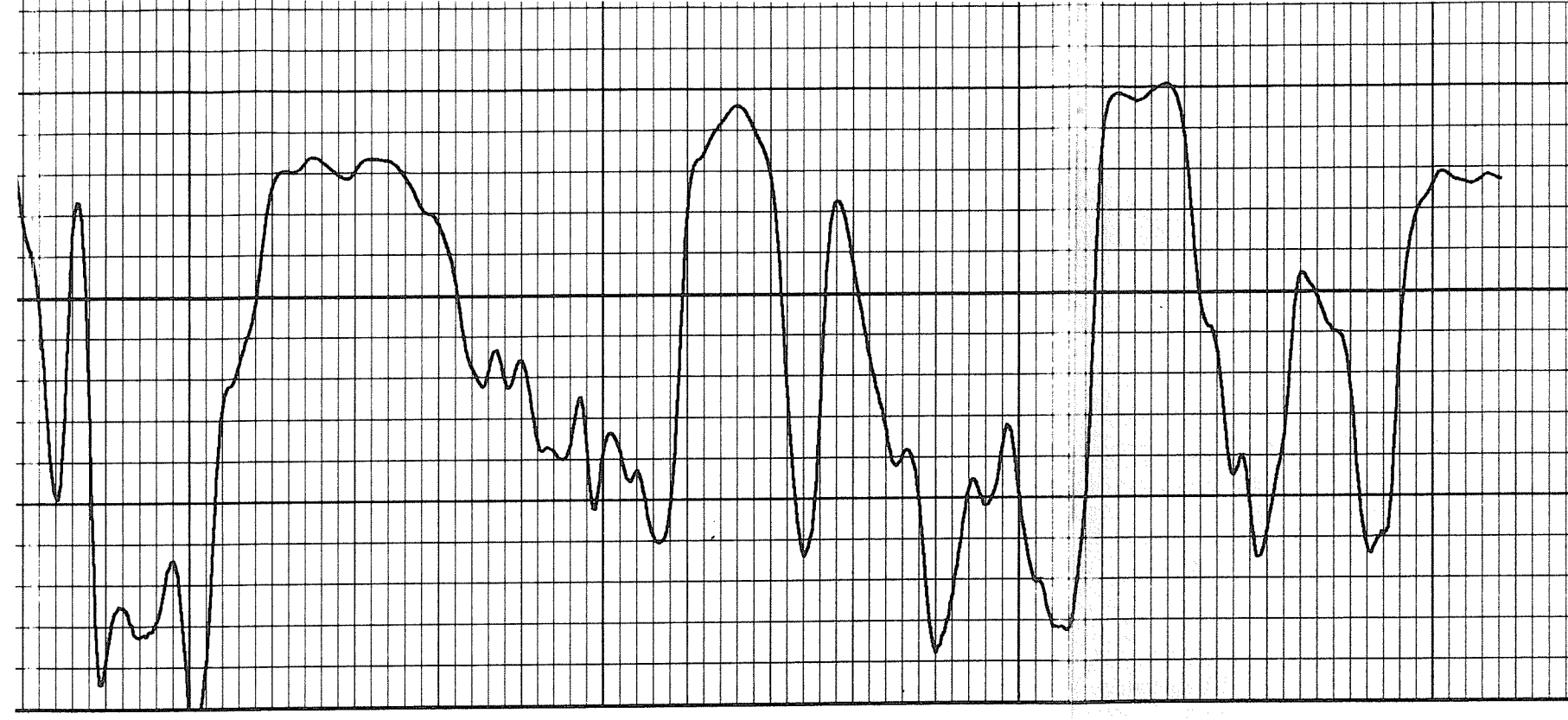
4050

4100



0. GAMMA #1 120.
API

0. COLLAR LOCATOR 10.



30. NEUTRON POROSITY
% CLIM

4100

4150

4200

4250

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

December 21, 2016

Pat Canaday
Gore Oil Company
202 S ST FRANCIS
PO BOX 2757
WICHITA, KS 67202-4518

Re: Plugging Application
API 15-153-20739-00-00
MUNSTERMANN 3
SW/4 Sec.19-01S-32W
Rawlins County, Kansas

Dear Pat Canaday:

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

Under K.A.R. 82-3-113(b)(2), you must notify DISTRICT 4 of your proposed plugging plan at least 5 days before plugging the well. DISTRICT 4's phone number is (785) 625-0550. Failure to notify DISTRICT 4, 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 June 21, 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 June 21, 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 4