



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	Gore Oil Company
Well Name	STEPHENS 1
Doc ID	1325581

Perforations And Bridge Plug Sets

Perforation Top	Perforation Base	Formation	Bridge Plug Depth
3103	3109	LKC	
3121	3127	LKC	
3232	3236	LKC	

GREAT GUNS



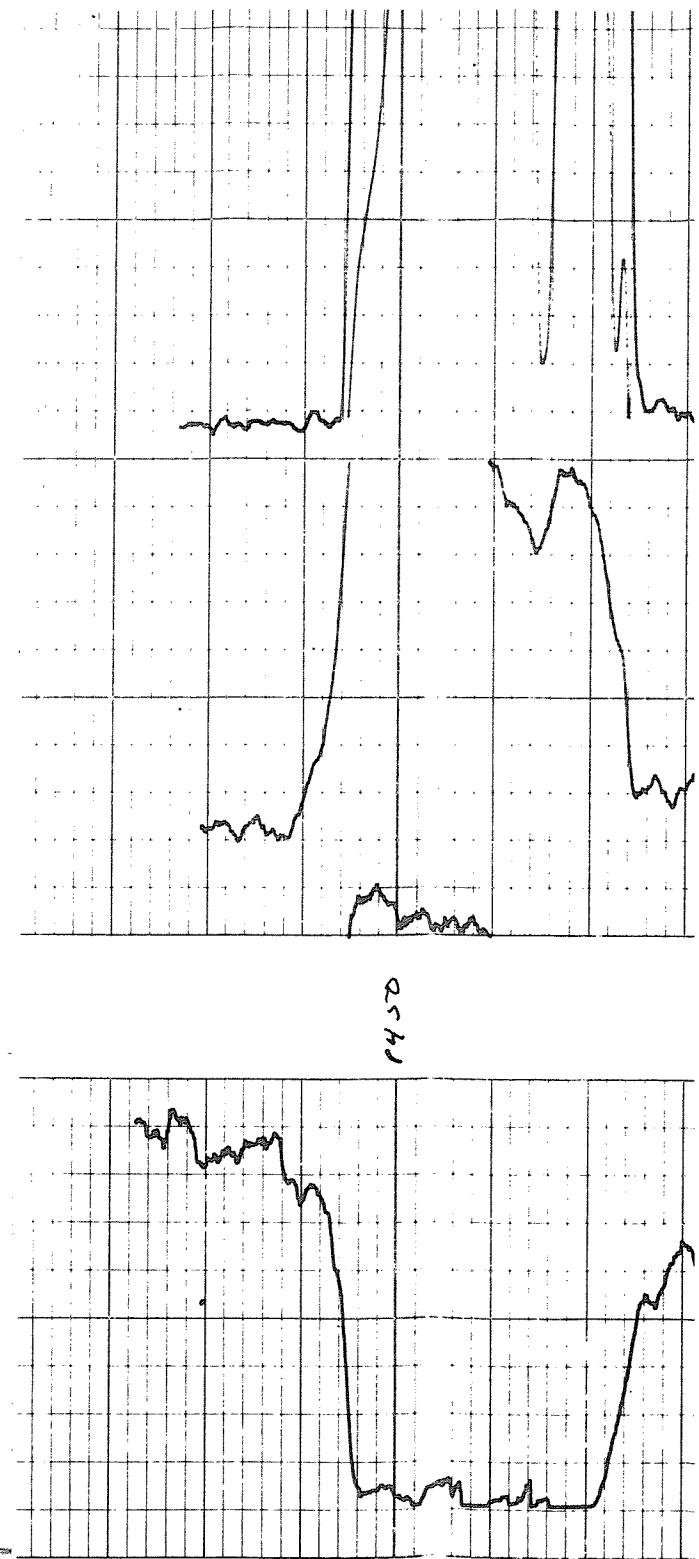
FILE NO.
COMPANY D.G. HANSEN Rec'd 9/27/64
WELL STEPHENS #1 D.G.
FIELD
COUNTY PHILLIPS **STATE** KANSAS
LOCATION: SE-NE-SW
OTHER SERVICES
SEC 35 TWP 4^S RGE 20^W

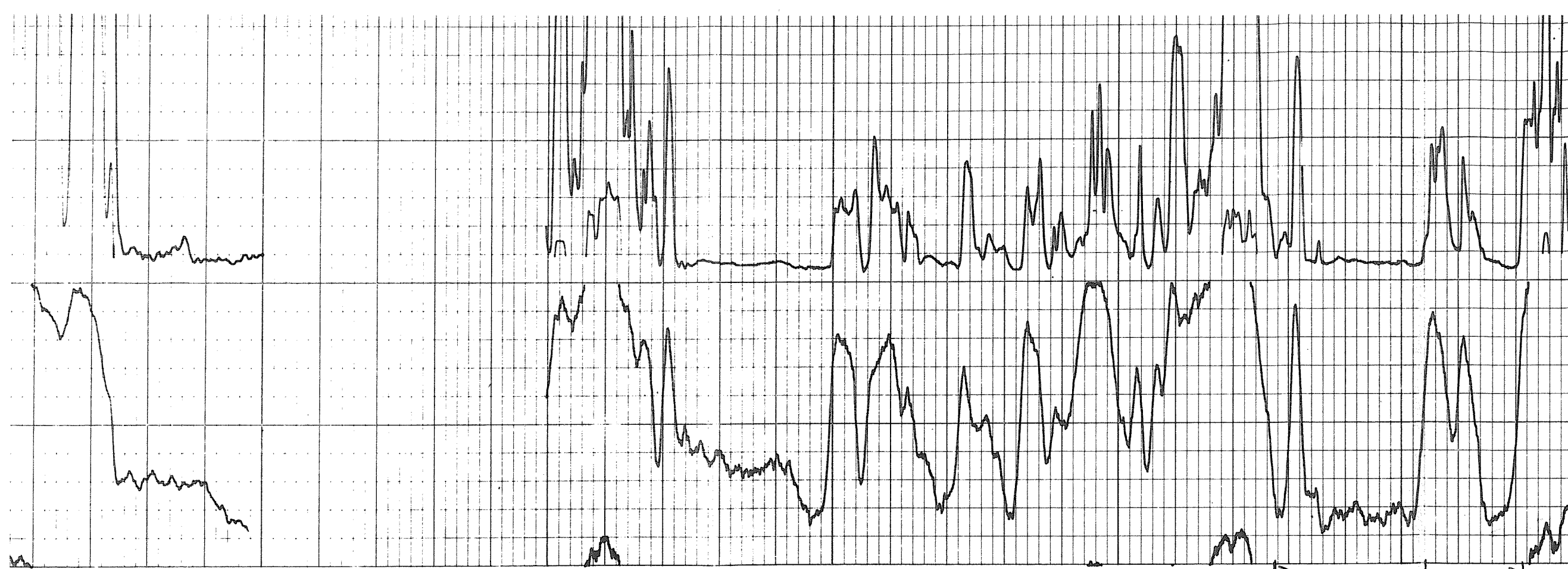
Permanent Datum GROUND LEVEL **Elev.** 1921
Log Measured from KELLY BUSHING 5 Ft. Above Permanent Datum **DF**
Drilling Measured from KELLY BUSHING **GL** 1921

Date	9-26-64	RAMONA	NEUTRON	GUARD
Run No.	28125	28125	28125	28125
Depth-Driller	3365	3365	3365	
Depth-Logger	3358	3358	3358	
Bottom Logged Interval	3359	3357	3353	
Top Logged Interval	2906	2906	2900	
Casing - Driller	@	@	858 @ 192'	@
Casing-Logger				
Bit Size			7 7/8"	
Type Fluid in Hole			CHEMICAL	
Density and Viscosity			90.3 39	
pH and Fluid Loss			11 9.8 cc	
Source of Sample			P.T	
Rm @ Meas. Temp.	.54 @ 71 °F	@ °F	.54 @ 71 °F	@ °F
Rmf @ Meas. Temp.	.38 @ 71 °F	@ °F	.38 @ 71 °F	@ °F
Rmc @ Meas. Temp.	@ °F	@ °F	@ °F	@ °F
Source of Rmf and Rmc			MEASURED	
Rm @ BHT	.18 @ 100 °F	@ °F	.18 @ 100 °F	@ °F
Time Since Circ.			2 hrs	
Max. Rec. Temp. Deg. F.	@ °F	@ °F	100 °F	@ °F
Equip. No. and Location			508 Hesp	
Recorded By			Hoffman	
Witnessed By			MR. SINGLETON	

REMARKS - loggers T.D. Skeels & 3365' But could not get to bottom. Hole was bridged off

Changes in Mud Type or Additional Samples	Scale Changes		Depth	Type Log	Scale Up Hole	Scale Down Hole
	Date	Sample No.				
Depth-Driller	9-26-64	DNE	3365			
Type Fluid in Hole			CHEMICAL			
Dens.			10.3			
pH			11			
Source of Sample			P.T			
Rm @ Meas. Temp.			.54 @ 71 °F			
Rmf @ Meas. Temp.			.38 @ 71 °F			
Rmc @ Meas. Temp.			@ °F			
Source Rmf Rmc			MEASURED			
Rm @ BHT			.18 @ 100 °F			
Rmf @ BHT			.1 @ 100 °F			
Rmc @ BHT			.05 @ 100 °F			





1500

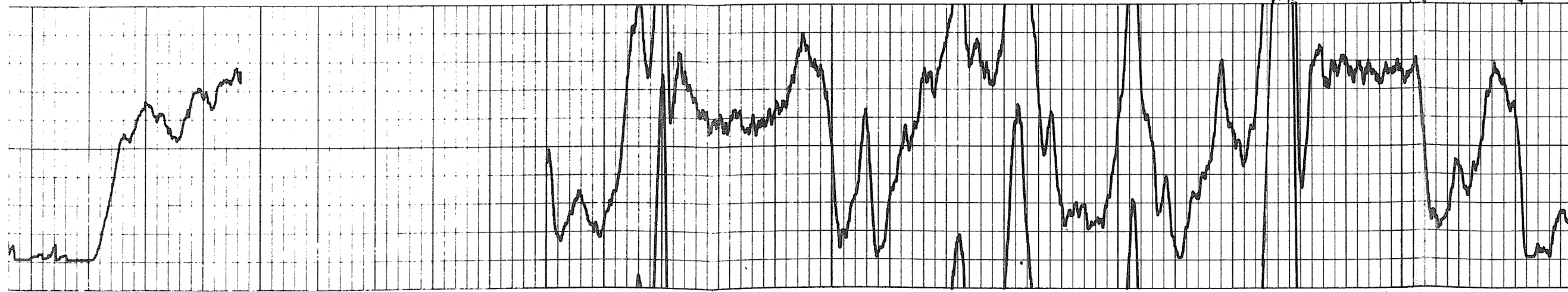
2900

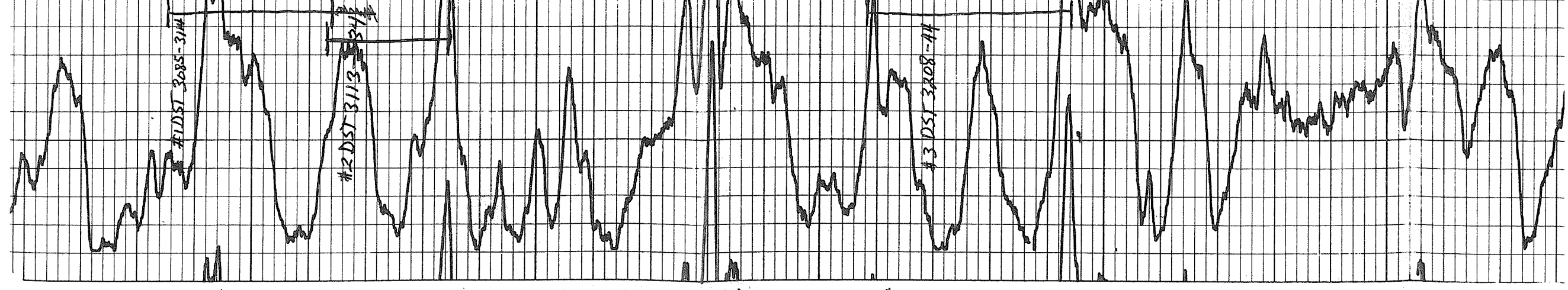
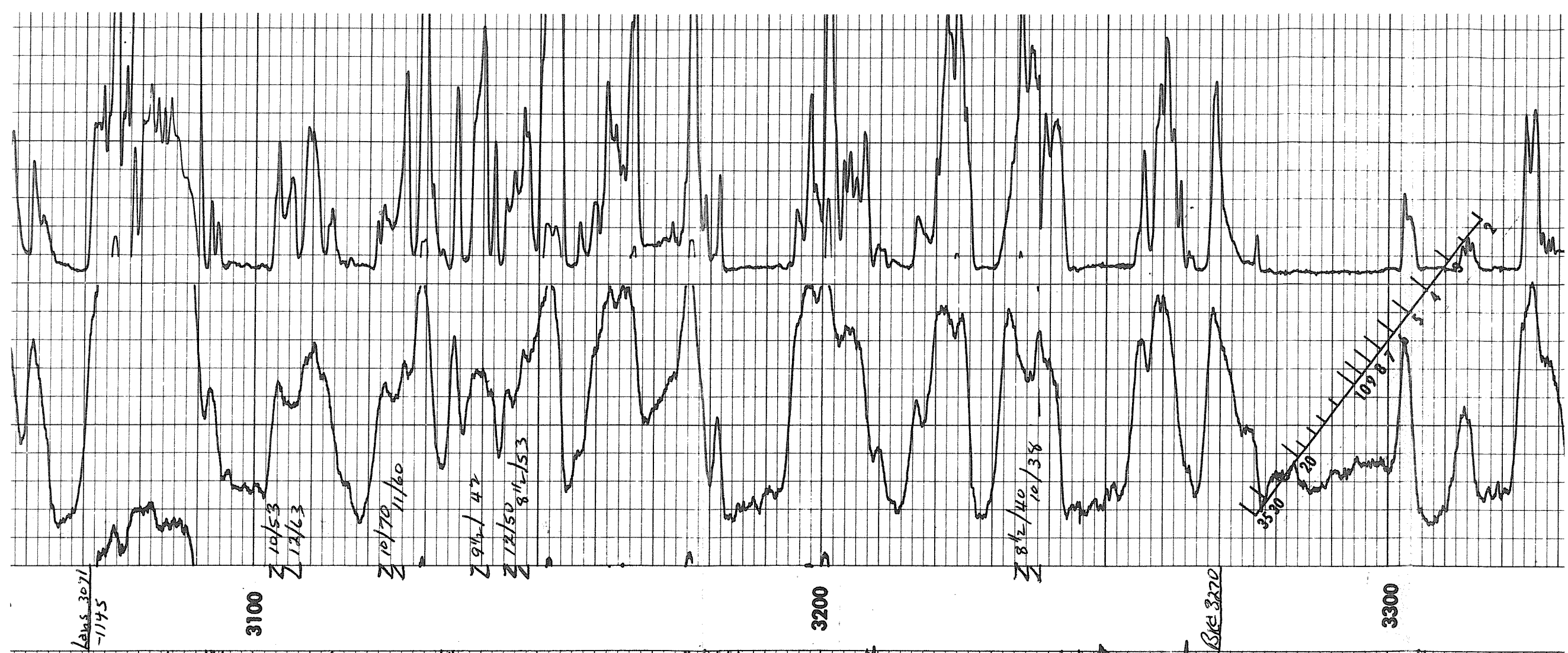
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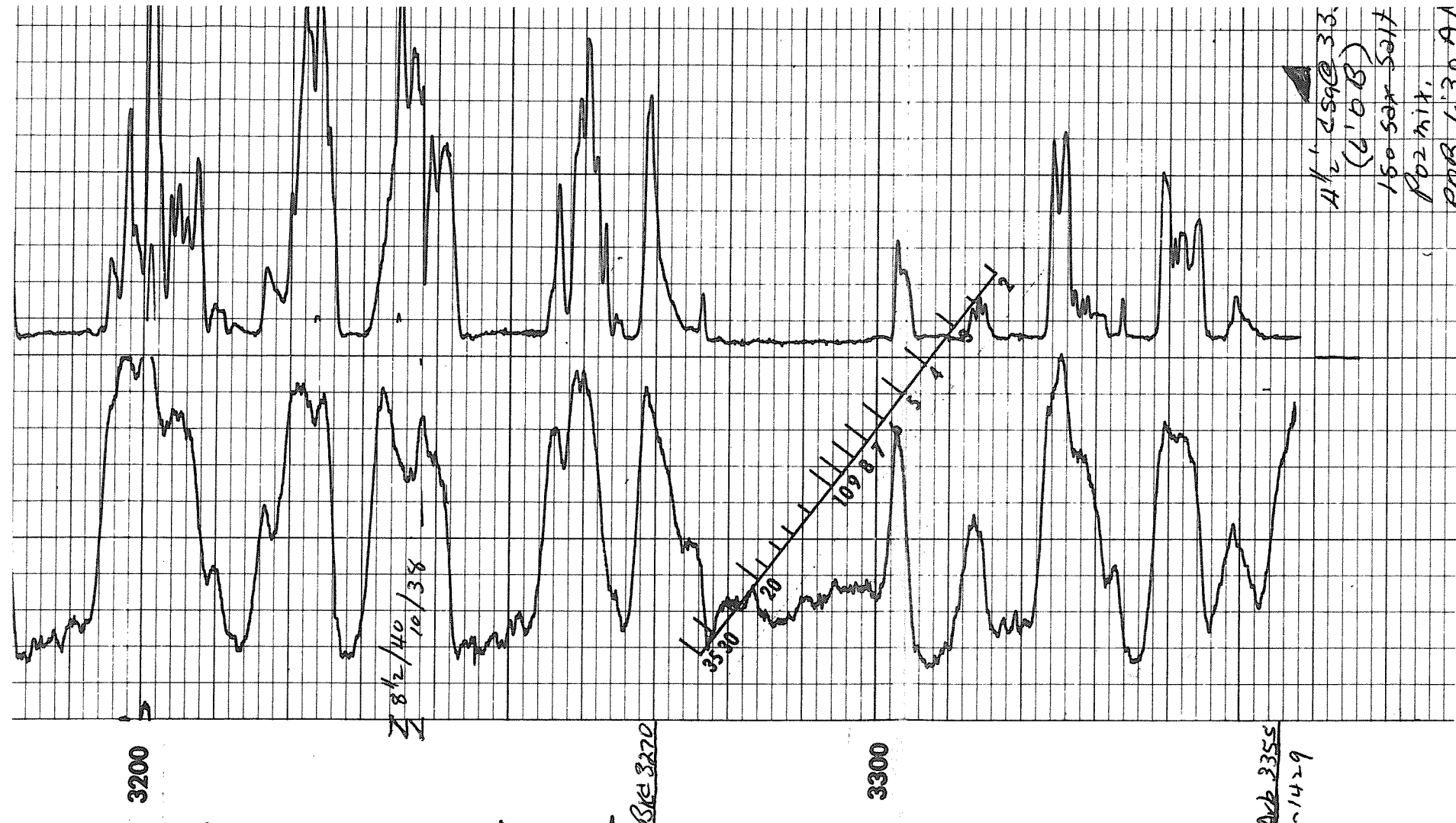
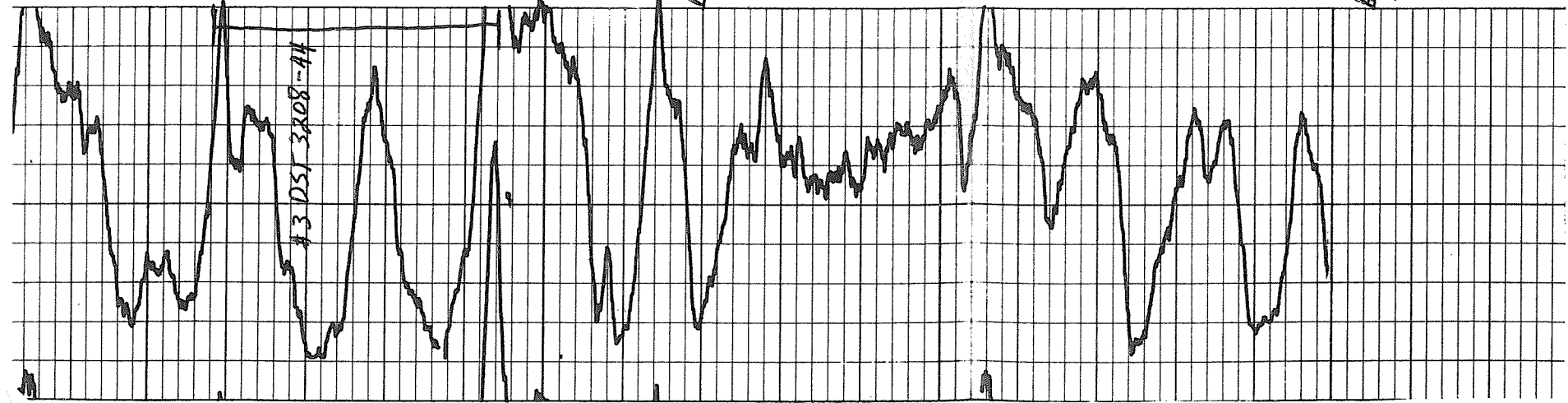
Heck
3027 - 1101

Jan 3054
-1128

Jan 3071
-1145







4 1/2' 259 @ 33.
 (6' 0.8)
 150 SAR Salt
 102 mit.
 1008 6:30 A1

9/27/64

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 29, 2016

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

Re: Plugging Application
API 15-147-30000-00-00
STEPHENS 1
SW/4 Sec.35-04S-20W
Phillips 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 29, 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 29, 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