

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

1328232

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

CORNISH

Oil Well Services
Channah, Kansas
Phone ME 1-9308
Box 280

RADIOACTIVITY LOG

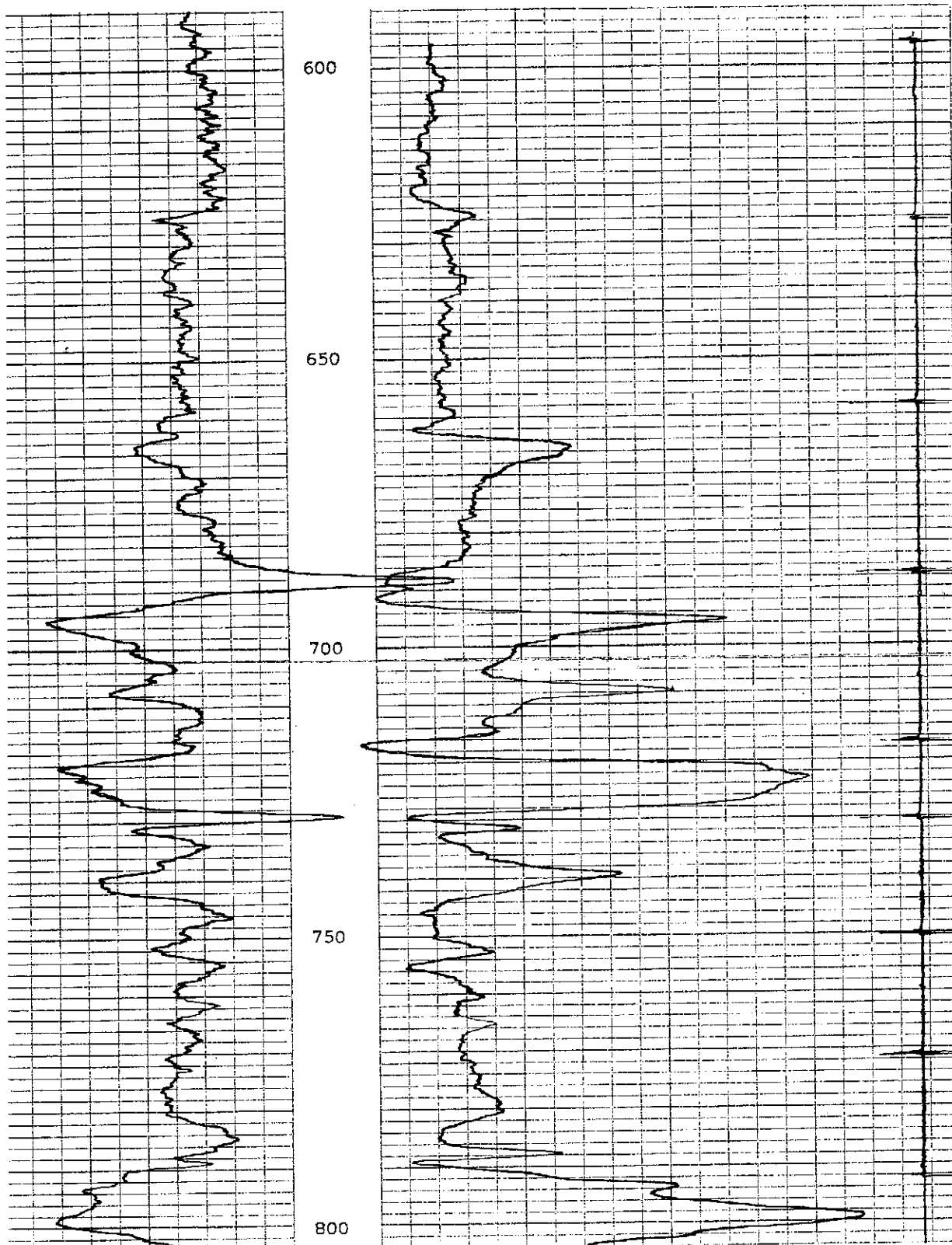
FILING NO.		COMPANY		HOWARD VANDERMAN	
WELL		BRODMERKE NO. 8		FIELD	
COUNTY		WOODSON		STATE	
LOCATION		NW 1/4 SW 1/4		OTHER SERVICES	
SEC. 30		TWP. 23S		RANGE 17E	
ELEV. 6.1		ELEV. 6.1		ELEV. 6.1	
LOG MEASURED FROM		LOG MEASURED FROM		LOG MEASURED FROM	
DATE		2-21-72		2-21-72	
RUN NO.		1 NW		1 NW	
TYPE LOG		GAMMA RAY		NEUTRON	
DEPTH - LOGGERS		953.4'		953.4'	
BOTTOM LOGGED INTERVAL		944.4'		952.4'	
TOP LOGGED INTERVAL		590'		596'	
RES. LOGGERS		WTR.		WTR.	
SALINITY, PPM CL					
DENSITY		FOUL		FOUL	
MAX. REC. TIME		CORNISH		CORNISH	
RECORDED BY		CORNISH		CORNISH	
WITNESSED BY					
BOREHOLE RECORD		CASING RECORD		T.D.B.	
NO. 1		NO. 2		NO. 3	
NO. 4		NO. 5		NO. 6	

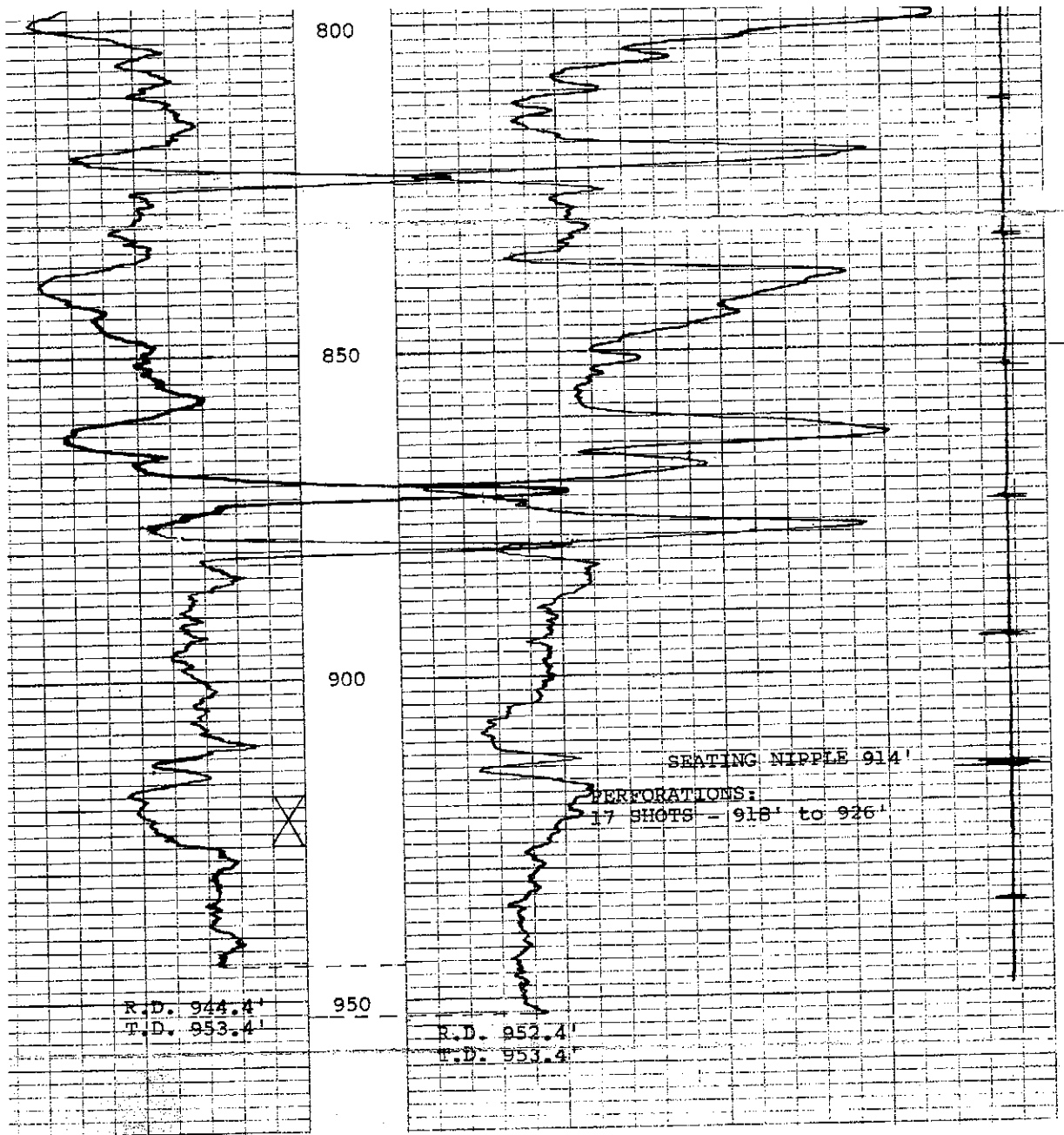
EQUIPMENT DATA					
GAMMA RAY			NEUTRON		
NO.	1 NW		RUN NO.	1 NW	
LOG. MODEL NO.	95S		LOG. TYPE	NEU/NEU	
DIAMETER	1-11/16"		TOOL MODEL NO.	95S	
DETECTOR MODEL NO.	95SC		DIA. DETECTOR	1-11/16"	
TYPE	SCINT.		DETECTOR MODEL NO.	95HE	
LENGTH	1" x 4"		TYPE	He	
DISTANCE TO N. SOURCE	8.5'		LENGTH	1" x 6"	
			SOURCE MODEL NO.	AC	
			SERIAL NO.	MRC415	
			SPACING	13"	
			TYPE	Am/Be	
			STRENGTH	6.7x10 ⁶	

LOGGING DATA										
GENERAL				GAMMA RAY			NEUTRON			
FROM	TO	SPEED FT. MIN.	T.C. SEC.	SENS. SETTINGS	ZERO DIV. L OR R	API G.R. UNITS PER LOG DIV.	T.C. SEC.	SENS. SETTINGS	ZERO DIV. L OR R	API N. UNITS PER LOG DIV.
952.4'	590'	25	2.5	10-0	1L	20	2.0	0-35	3L	

REFERENCE LITERATURE

Drilling Contractor - Bell Drig. Co.





RODMERKLE NO. 8
OWARD VANDERMAN
OODSON COUNTY, KANSAS
EBRUARY 21, 1972

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

January 18, 2017

Jody Owens
Owens Petroleum LLC
1274 202ND RD
YATES CENTER, KS 66783-5411

Re: Plugging Application
API 15-207-20558-00-00
BRODMERKLE 8
SW/4 Sec.30-23S-17E
Woodson County, Kansas

Dear Jody Owens:

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 July 18, 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 July 18, 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