

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	Red Oak Energy, Inc.
Well Name	FS/Brenn Unit 1-26
Doc ID	1332403

Perforations And Bridge Plug Sets

Perforation Top	Perforation Base	Formation	Bridge Plug Depth
4700	4703	Cherokee	
4715	4719	Johnson	



**SUPERIOR**  
Hays,  
Kansas

**COMPENSATED  
NEUTRON / DENSITY  
LOG**

Company RED OAK ENERGY, INC.  
Well FS/BRENN UNIT #1-26  
Field WILDCAT  
County THOMAS  
State KANSAS

Company RED OAK ENERGY, INC.  
Well FS/BRENN UNIT #1-26  
Field WILDCAT  
County THOMAS State KANSAS

Location: API # : 15-193-20847-0000  
1800' FSL & 2500' FEL  
SEC 26 TWP 8S RGE 35W  
Permanent Datum GROUND LEVEL Elevation 3312  
Log Measured From KELLY BUSHING 5' A.G.L.  
Drilling Measured From KELLY BUSHING  
Elevation  
DIL  
MEL/SON  
K.B. 3317  
D.F. 3315  
G.L. 3312

Date	5/2/12		
Run Number	ONE		
Depth Driller	4925		
Depth Logger	4928		
Bottom Logged Interval	4904		
Top Log Interval	3600		
Casing Driller	8 5/8" @ 326		
Casing Logger			
Bit Size	7 7/8		
Type Fluid in Hole	CHEMICAL MUD	CHLORIDES 7400 PPM	
Density / Viscosity	9.0/54		
pH / Fluid Loss	10.5/8.0		
Source of Sample	FLOWLINE		
Rim @ Meas. Temp	.65 @ 85F		
Rmf @ Meas. Temp	.48 @ 85F		
Rmc @ Meas. Temp	.78 @ 85F		
Source of Rmf / Rmc	MEASURED		
Rim @ BHT	.44 @ 124F		
Time Circulation Stopped	2 HOURS		
Time Logger on Bottom			
Maximum Recorded Temperature	124F		
Equipment Number	680		
Location	HAYS, KS.		
Recorded By	JASON CAPPELLUCCI		
Witnessed By	SEAN DEENIHAN		

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All interpretations are opinions based on inferences from electrical or other measurements and we cannot and do not guarantee the accuracy or correctness of any interpretation, and we shall not, except in the case of gross or willful negligence on our part, be liable or responsible for any loss, costs, damages, or expenses incurred or sustained by anyone resulting from any interpretation made by any of our officers, agents or employees. These interpretations are also subject to our general terms and conditions set out in our current Price Schedule.

Comments

THANK YOU FOR USING SUPERIOR WELL SERVICE (785) 628-6395  
DIRECTIONS  
I-70 & LEVANT EXIT - 2 MILES S. - 1/2 E. - S. INTO

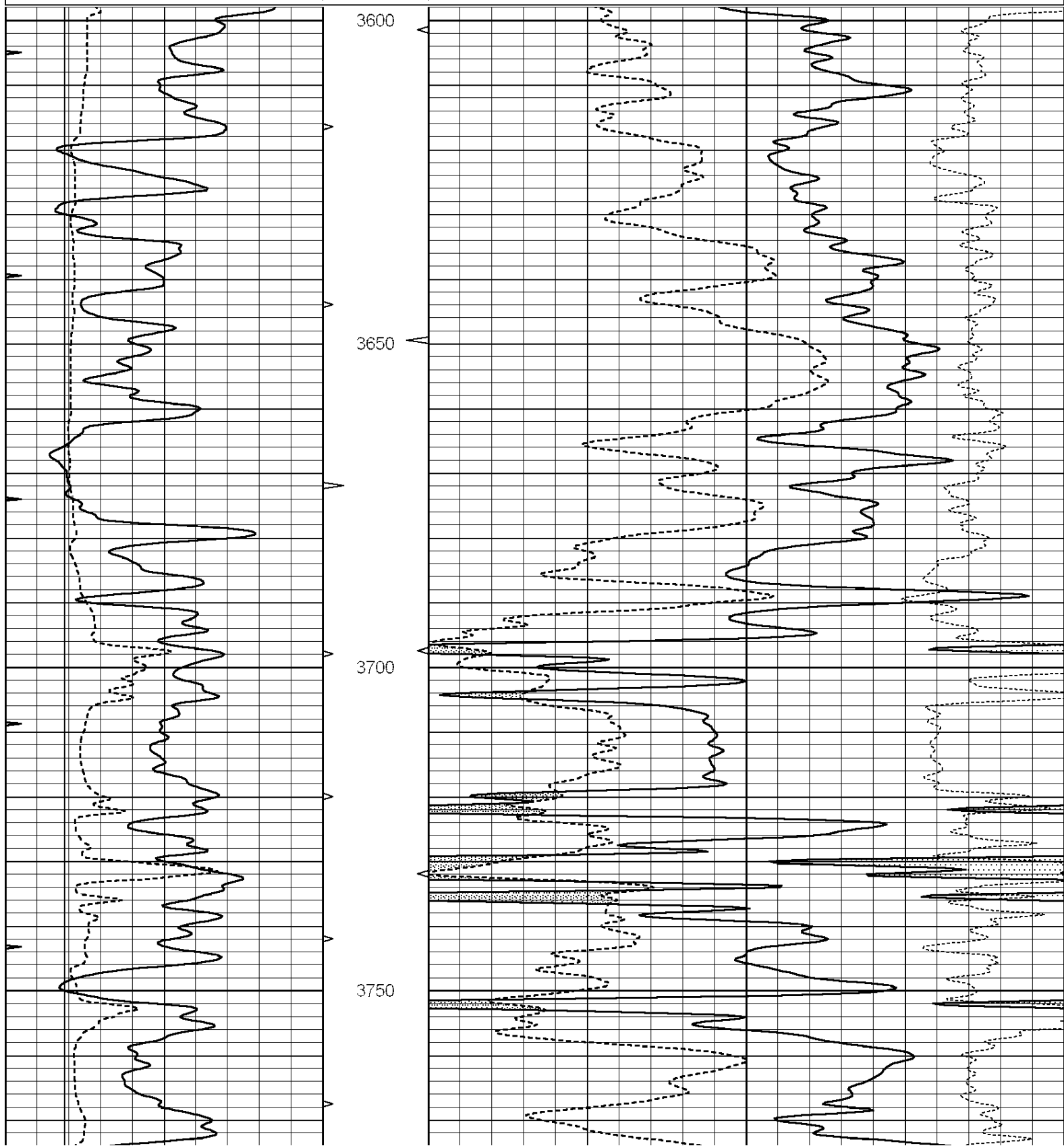


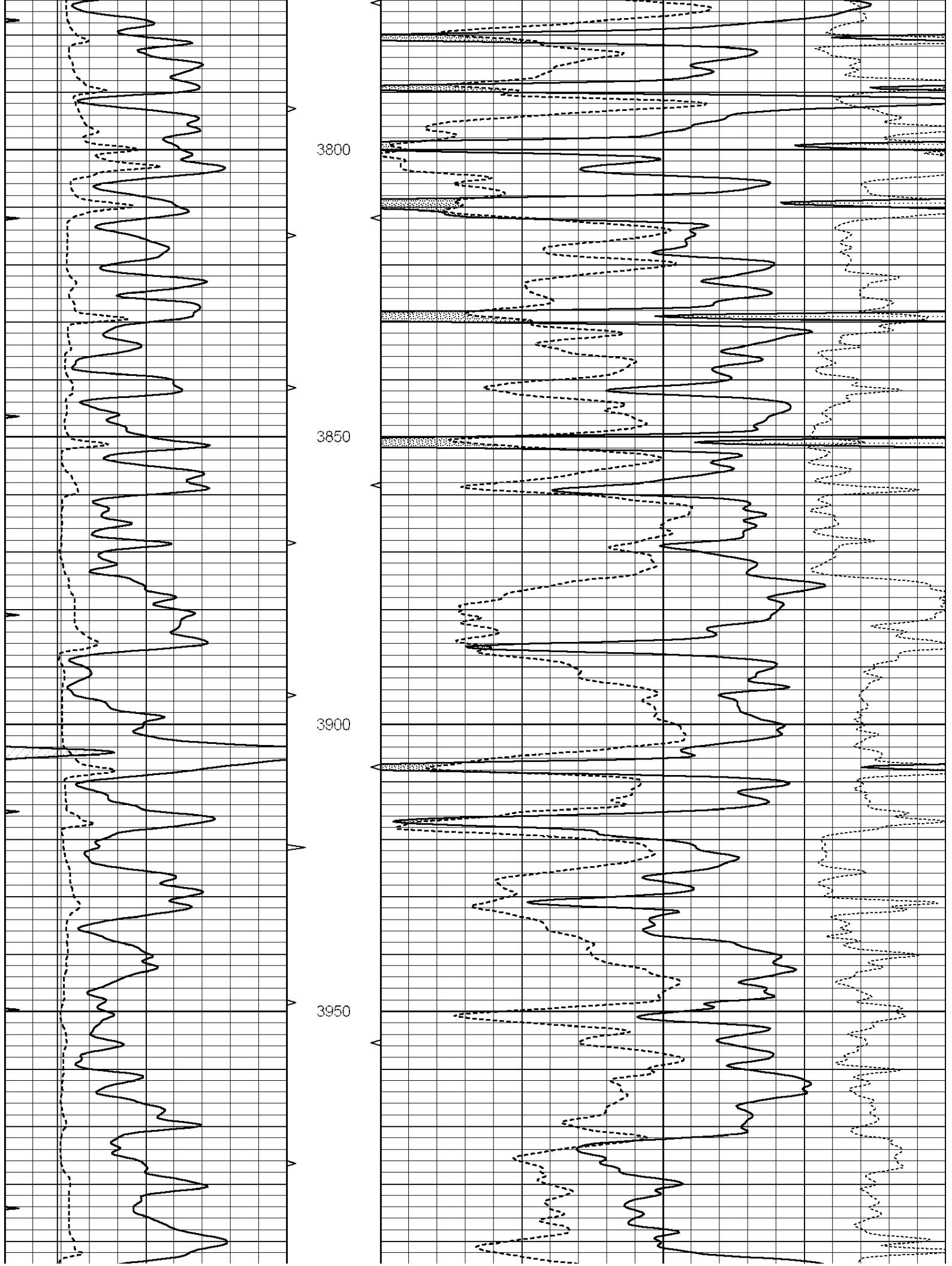
**SUPERIOR**  
Hays,  
Kansas

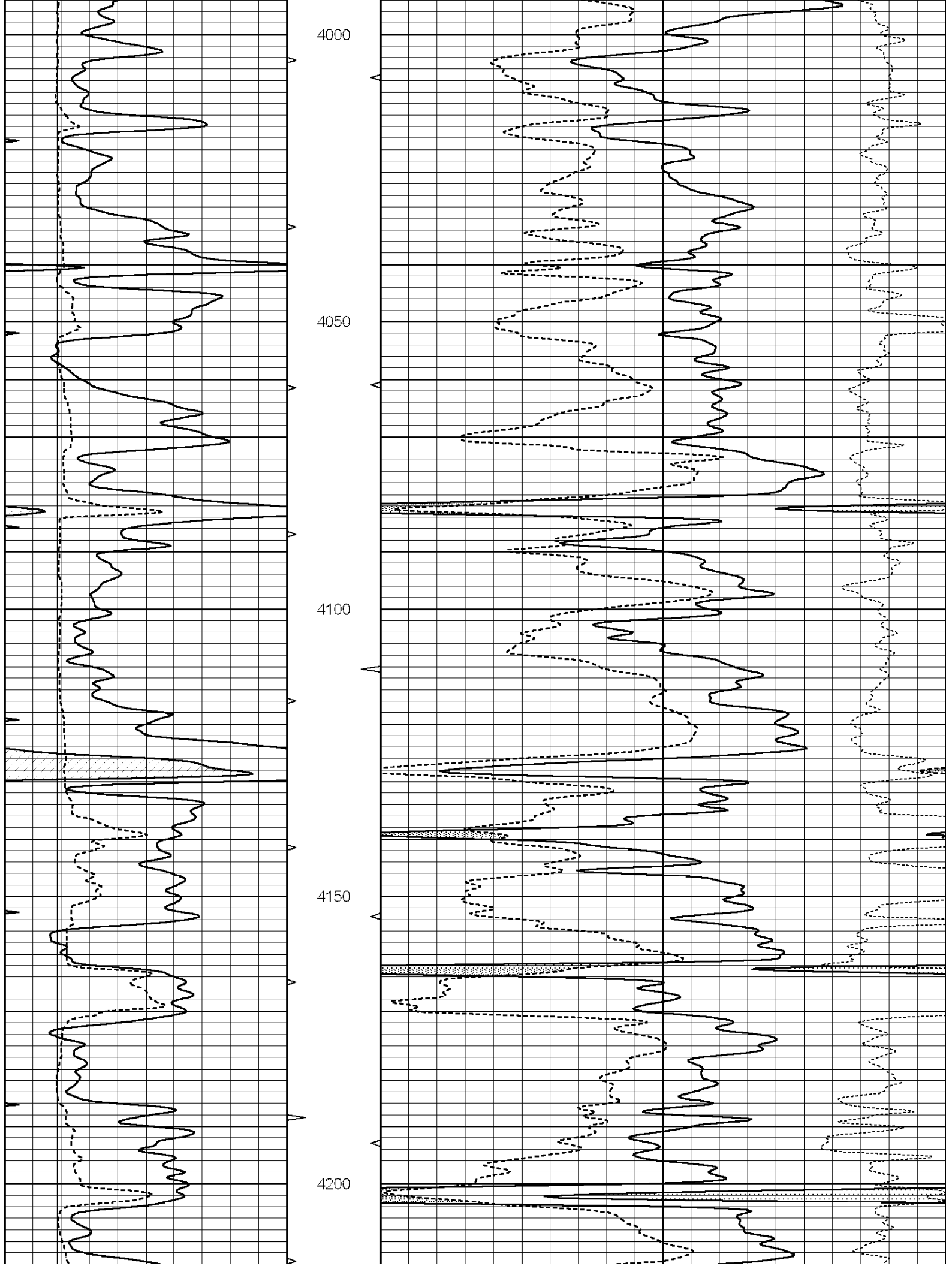
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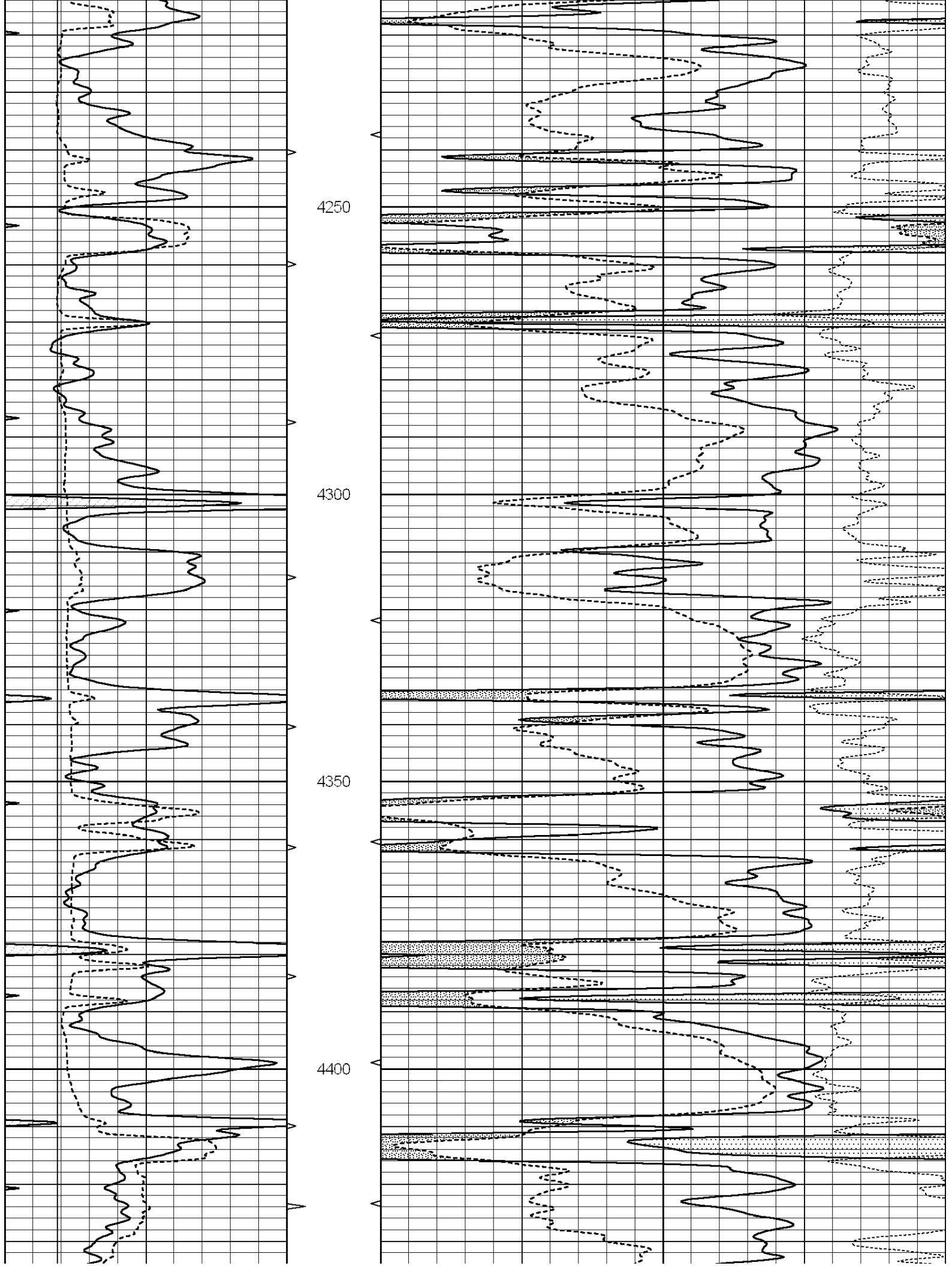
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 Dataset Pathname: pass3.1  
 Presentation Format: \_den\_neu  
 Dataset Creation: Wed May 02 14:40:04 2012 by Calc Open-Cased 090629  
 Charted by: Depth in Feet scaled 1:240

0	GAMMA RAY (GAPI)	150	AVTX	30	COMPENSATED DENSITY (pu)	-10
6	CALIPER (in)	16	10 (ft3)	0 30	COMPENSATED NEUTRON (pu)	-10
0	MINMK	20	BVTX		-0.25 CORRECTION (g/cc)	0.25
			0 (ft3)	10		

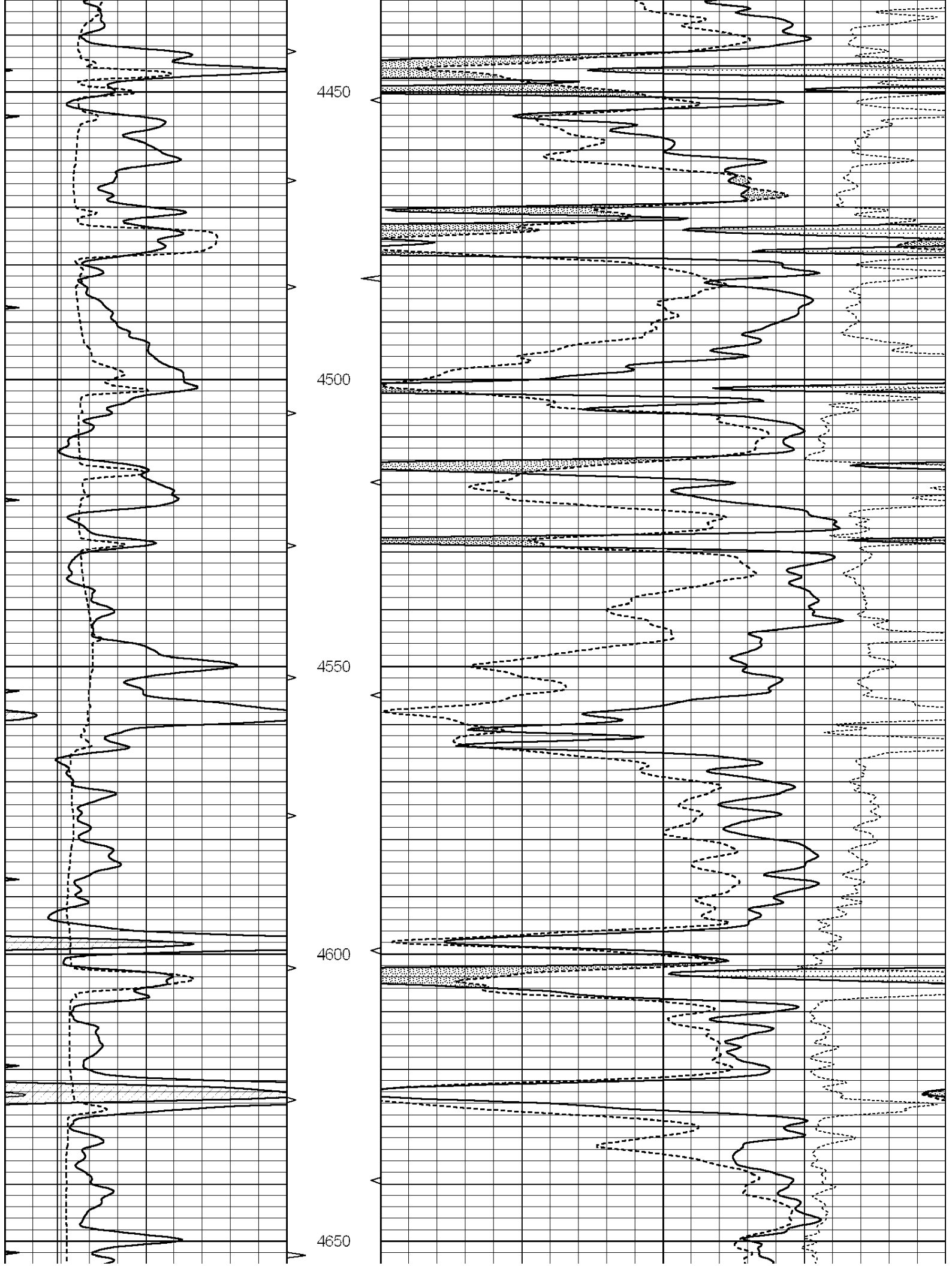


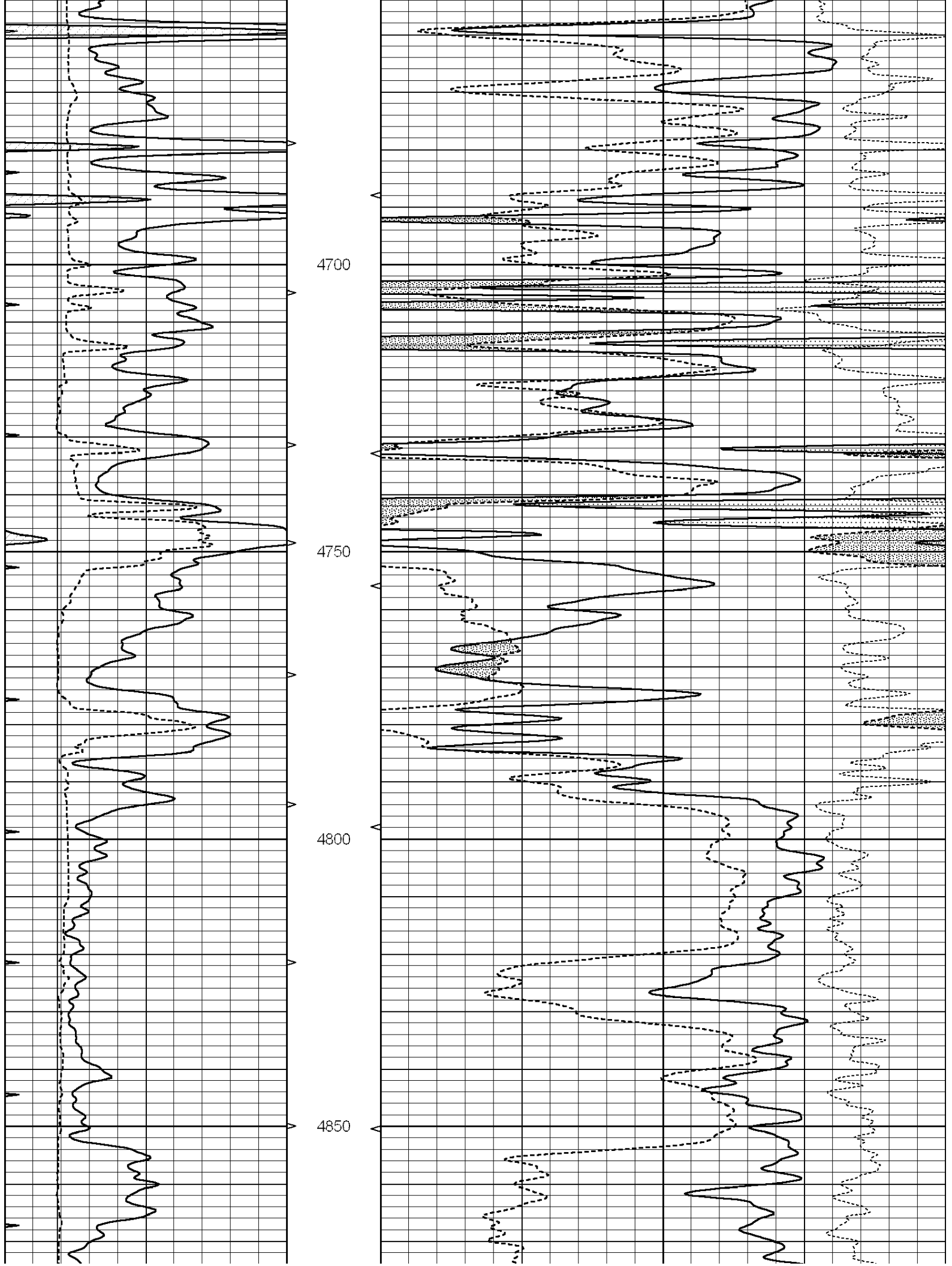


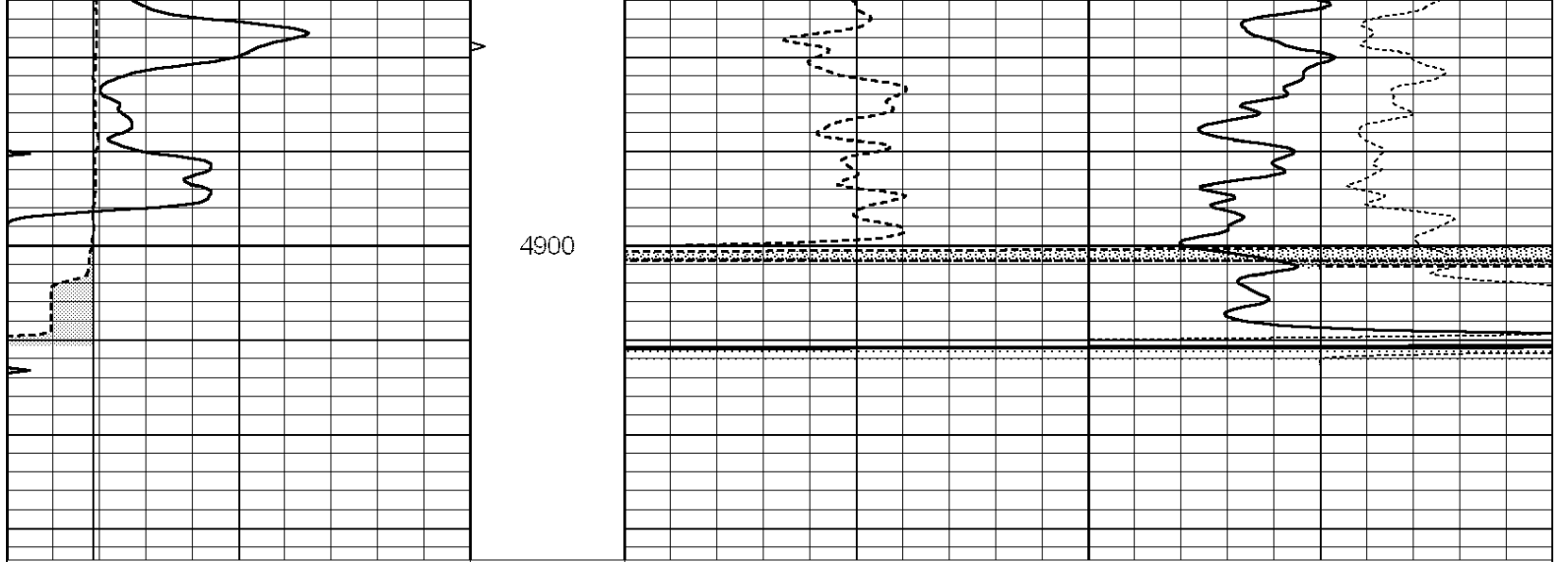












0	GAMMA RAY (GAPI)	150	AVTX	30	COMPENSATED DENSITY (pu)	-10
6	CALIPER (in)	16	10 (ft3) 0	30	COMPENSATED NEUTRON (pu)	-10
0	MINMK	20	BVTX		-0.25 CORRECTION (g/cc)	0.25
			0 (ft3) 10			

February 03, 2017

Ryan Davis  
Red Oak Energy, Inc.  
7701 E KELLOGG DR STE 710  
WICHITA, KS 67207-1738

Re: Plugging Application  
API 15-193-20847-00-00  
FS/Brenn Unit 1-26  
SE/4 Sec.26-08S-35W  
Thomas County, Kansas

Dear Ryan Davis:

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 August 03, 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 August 03, 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