

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

1352081

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

Sector Bond / Gamma Ray
CCL Log

(785) 625-3858

API No.	Company ARDC Inc.			
	Well Jacques No.1			
	Field			
	County Ellis	State Kansas		
	Location SE-SE-NE		Other Services 40 Arm Caliper Log	Elevation
	Sec: 12	Twp: 13S	Rge: 20W	
	Permanent Datum	Ground Level	Elevation 2119	
	Measured From	Kelly Bushing	5 Ft. Above Perm. Datum	
	Measuring Measured From	Kelly Bushing		
	Well Number	One		
	Well Survey	7/19/2010		
	Well Cementing	N/A		
	Well Cementing Operation	Primary		
	Well Driller	3835		
	Well Logger	3662		
	Well Interval	2661 to 100		
	Well Driller	5.5 @ TD		
	Well at Collar -- D.V. Tool	///	///	
	Well Freeze Depth	///		
	Well Count & Type Cement	///		
	Well Count & Type Admix	///		
	Well Free Fluid In Hole	Water/Oil		
	Well Fluid Level	130		
	Well Fluid PPM CL	///		
	Well Weight lb/gal -- Vis.	///		
	Well prox. Logged Cement Top	2815 B.Stage		
	Well Calculated Cement Top	///		
	Well x. Hole Temperature	114		
	Well RBT1-1	RBT1-1		
	Well No.	3-5		
	Well Logging Recorded	13	Hays	
	Well Equipment -- Location	S. Chesney		
	Well Recorded By	Chris White		

<<< Fold Here >>>

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, 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 Log-Tech, Inc.
(785) 625-3858Hays, W on old 40 to 160 Rd, 3/4N,
W into @ T.B.

Main Pass

LOG-TECH

greg-whitehair.db

sgribl/pass7

|qcs|

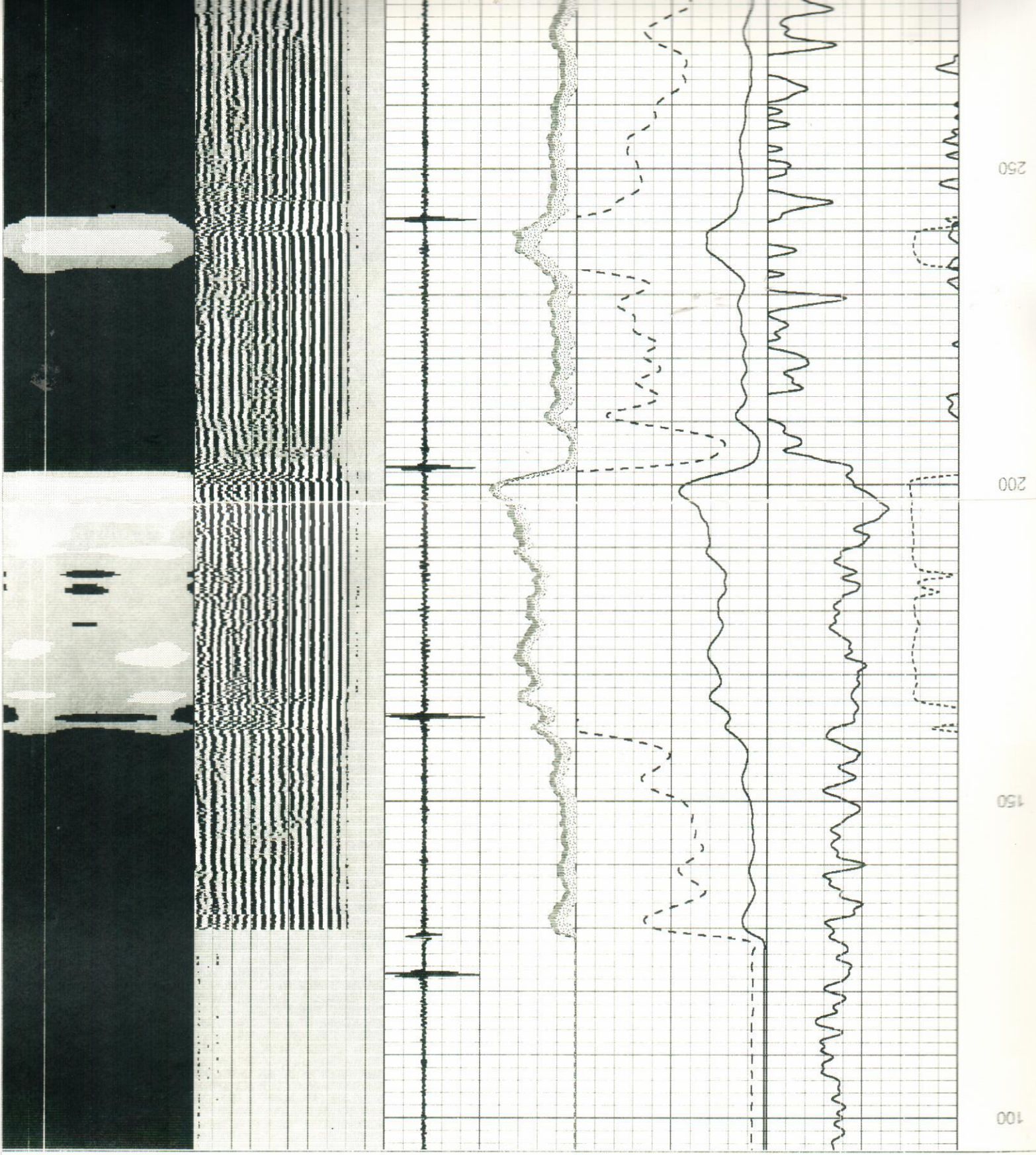
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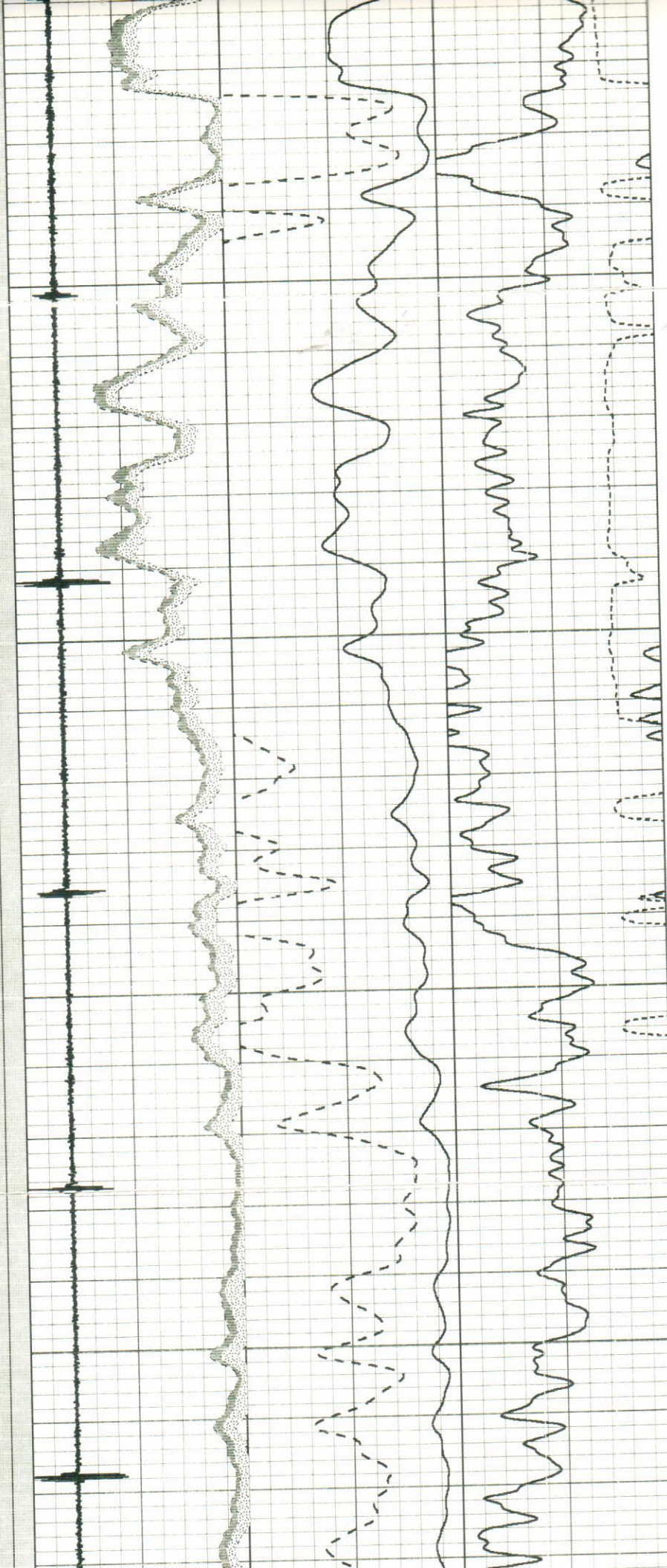
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Depth in Feet scaled 1:240

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335	225	Amplified Amplitude	0	0	AMPMAX	150
0	150	(mV)	20	0	AMPMIN	150
150	375			10	CCL	-2.6

VDL	1200	1	25	75
Sector Map	8			





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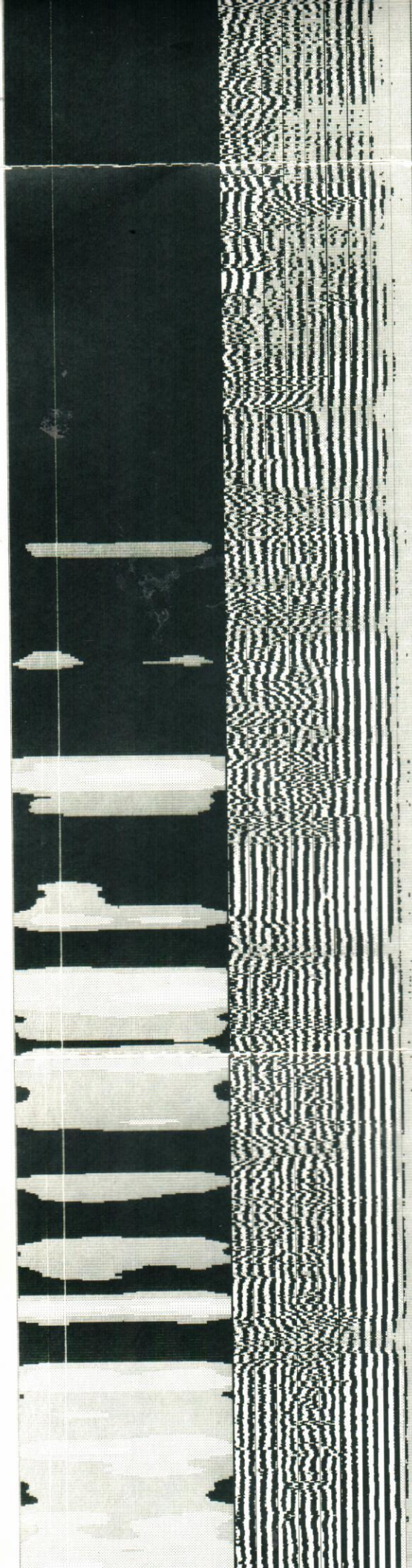
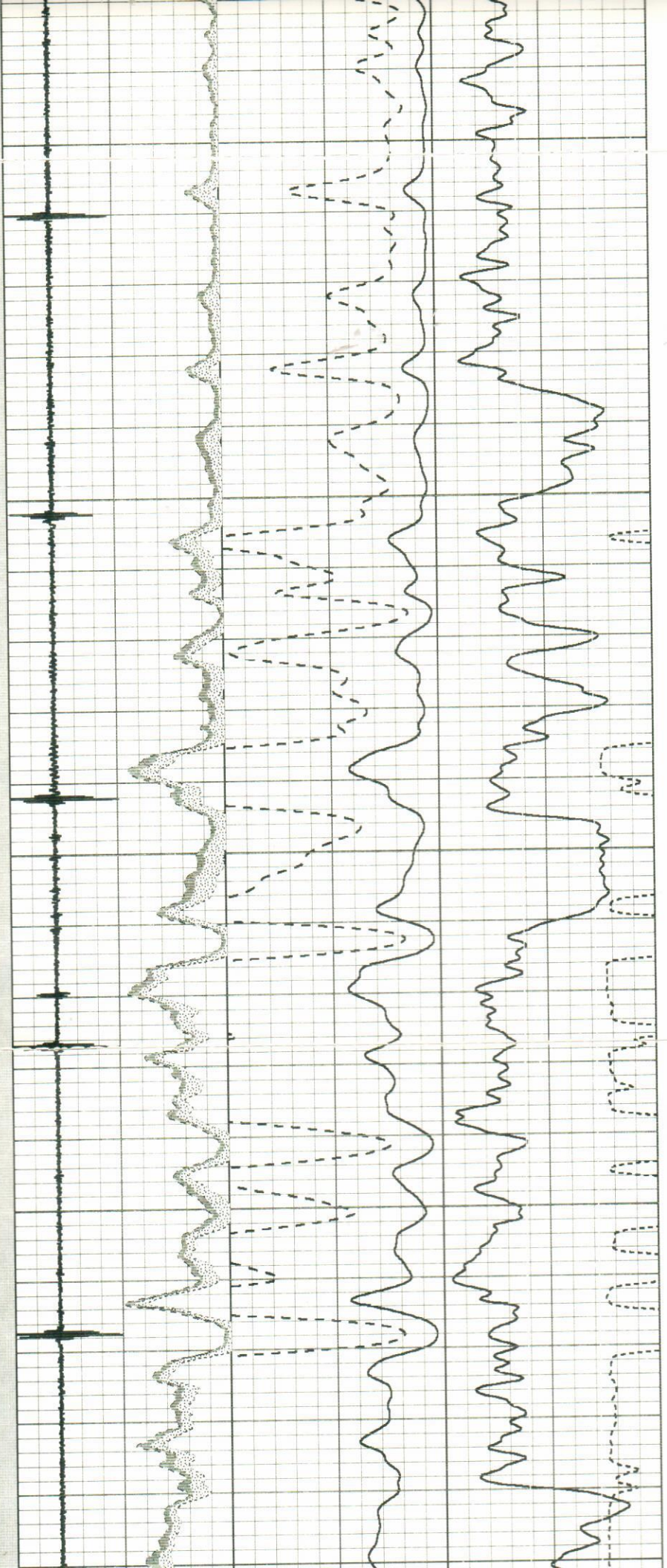
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650

600

550

500

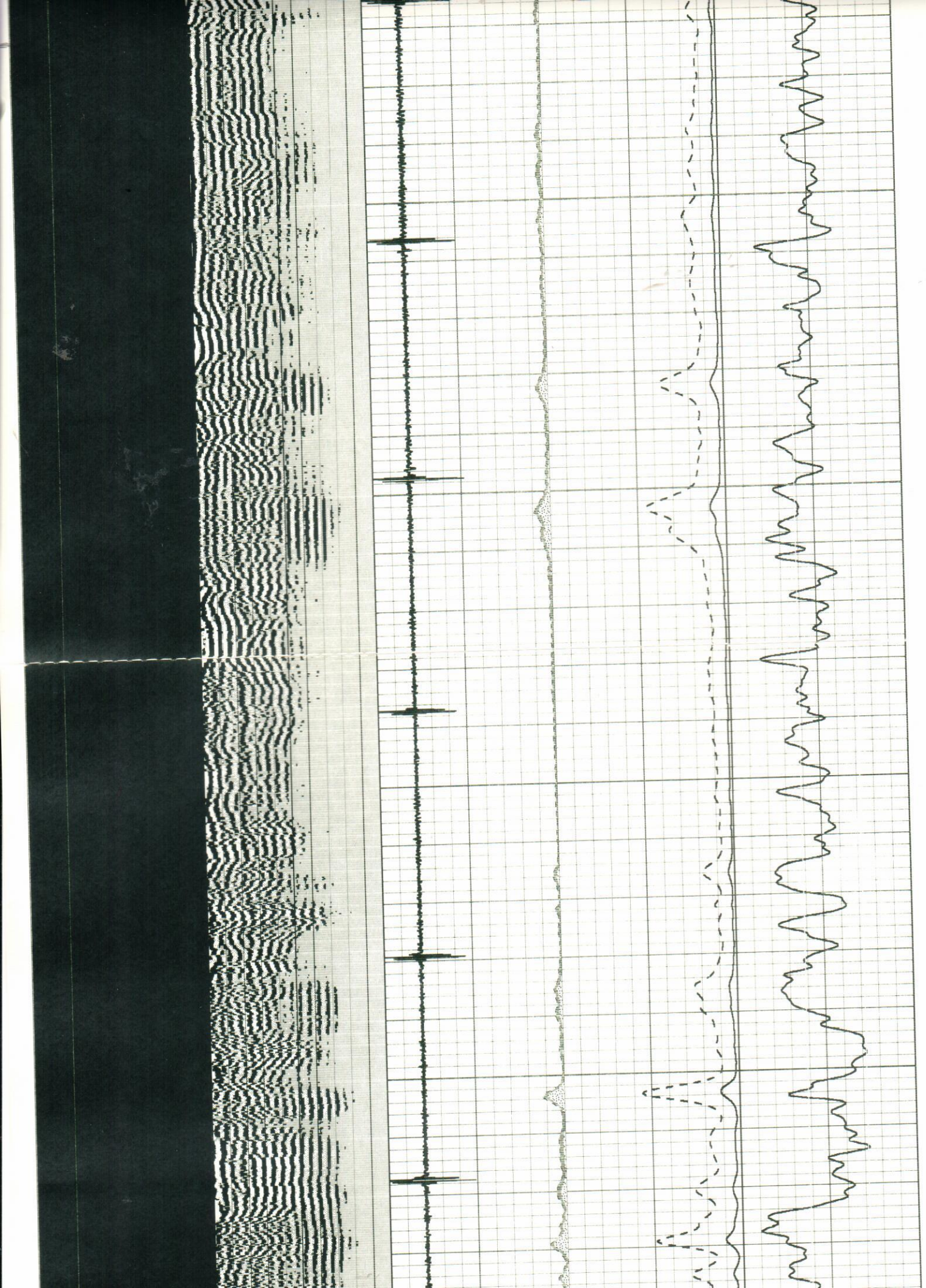


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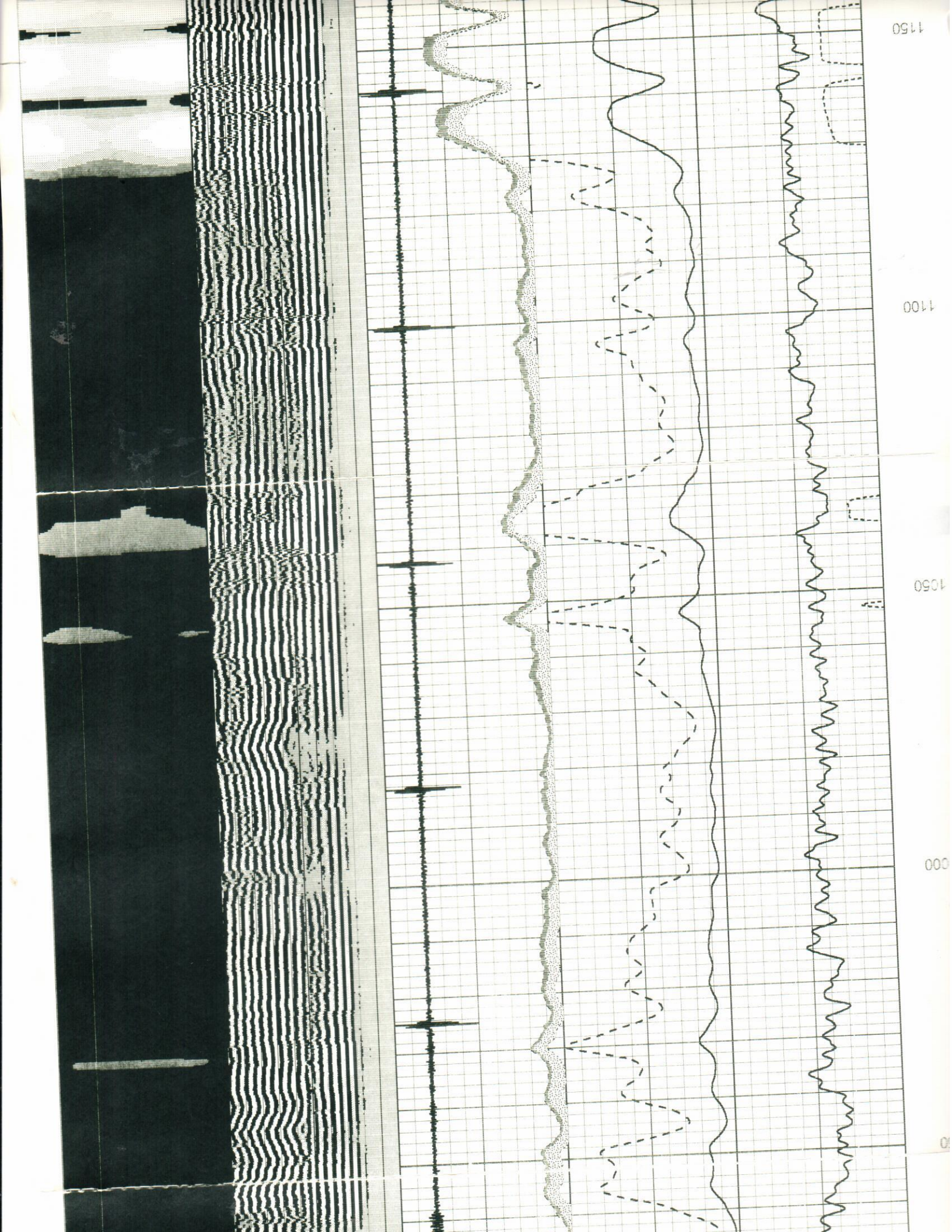
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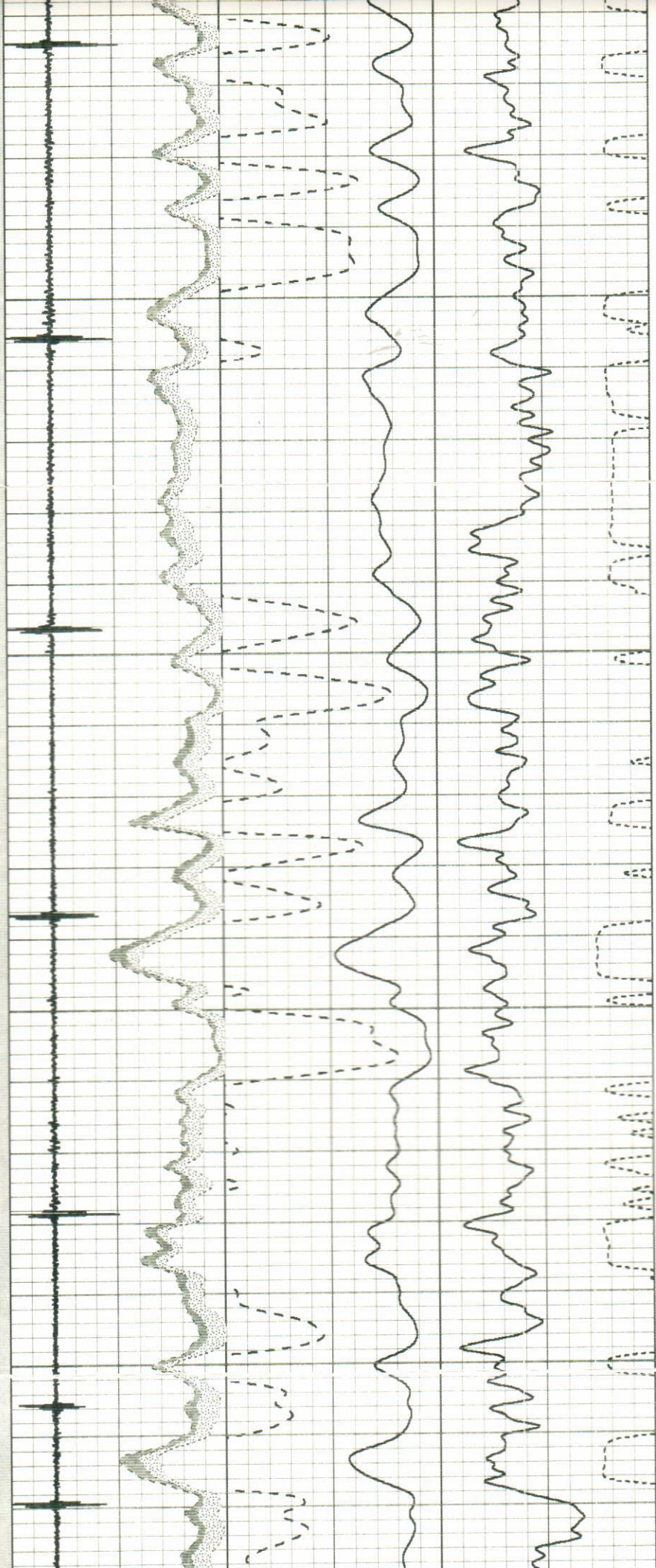


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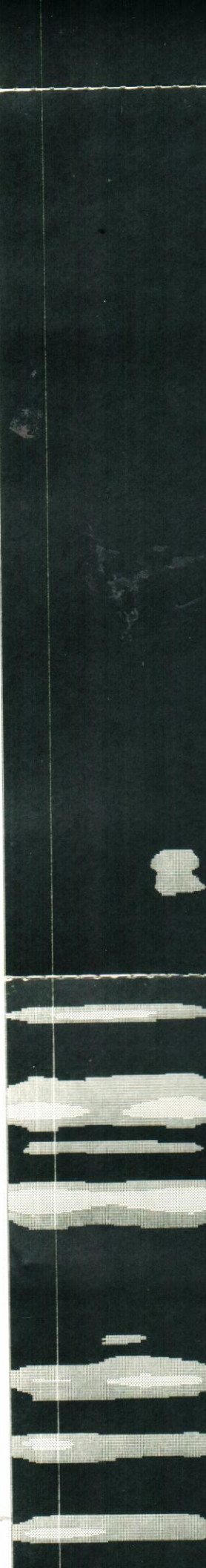
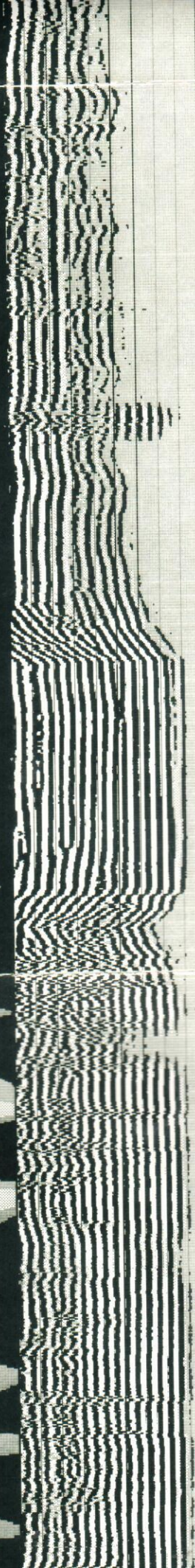
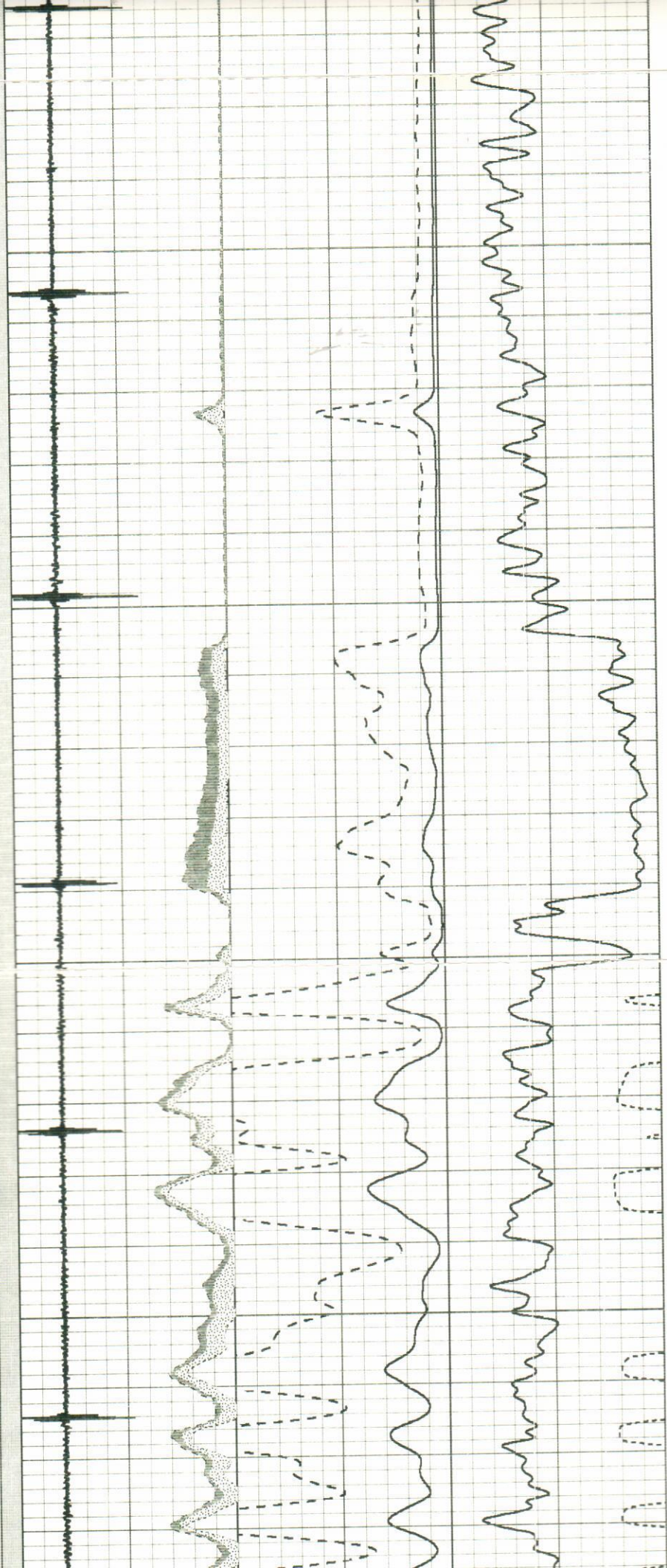


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1450

1400

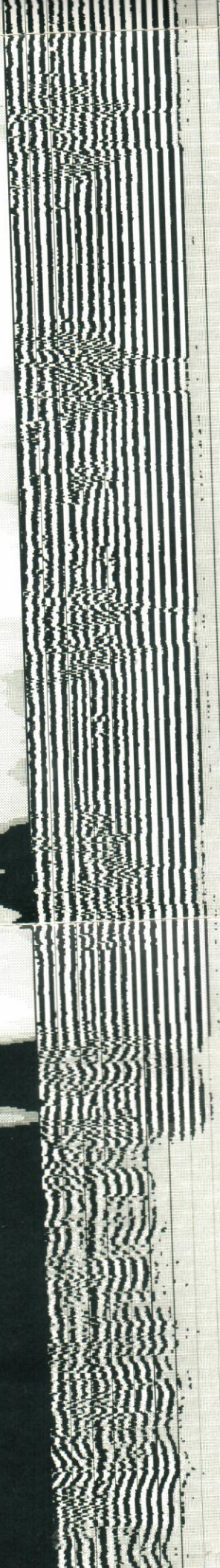
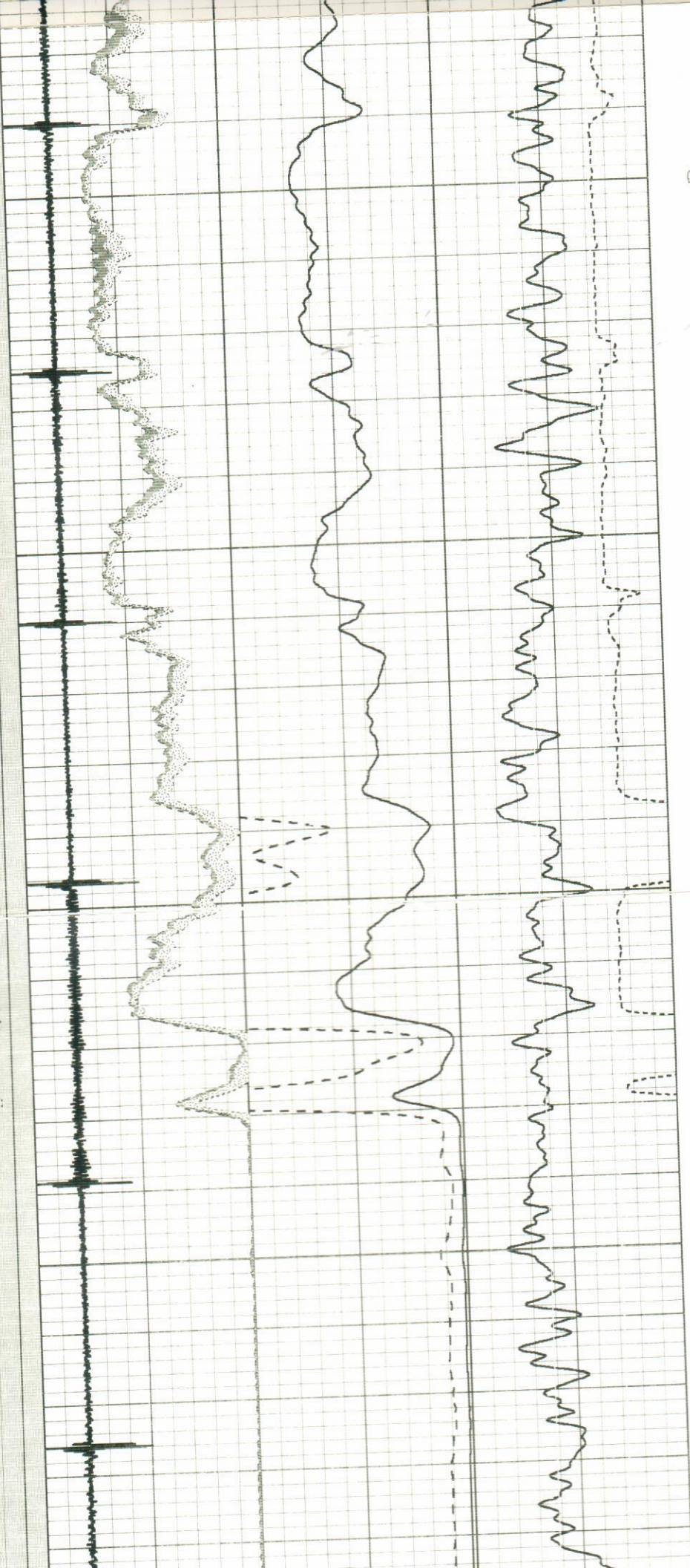


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1750

1700

1650

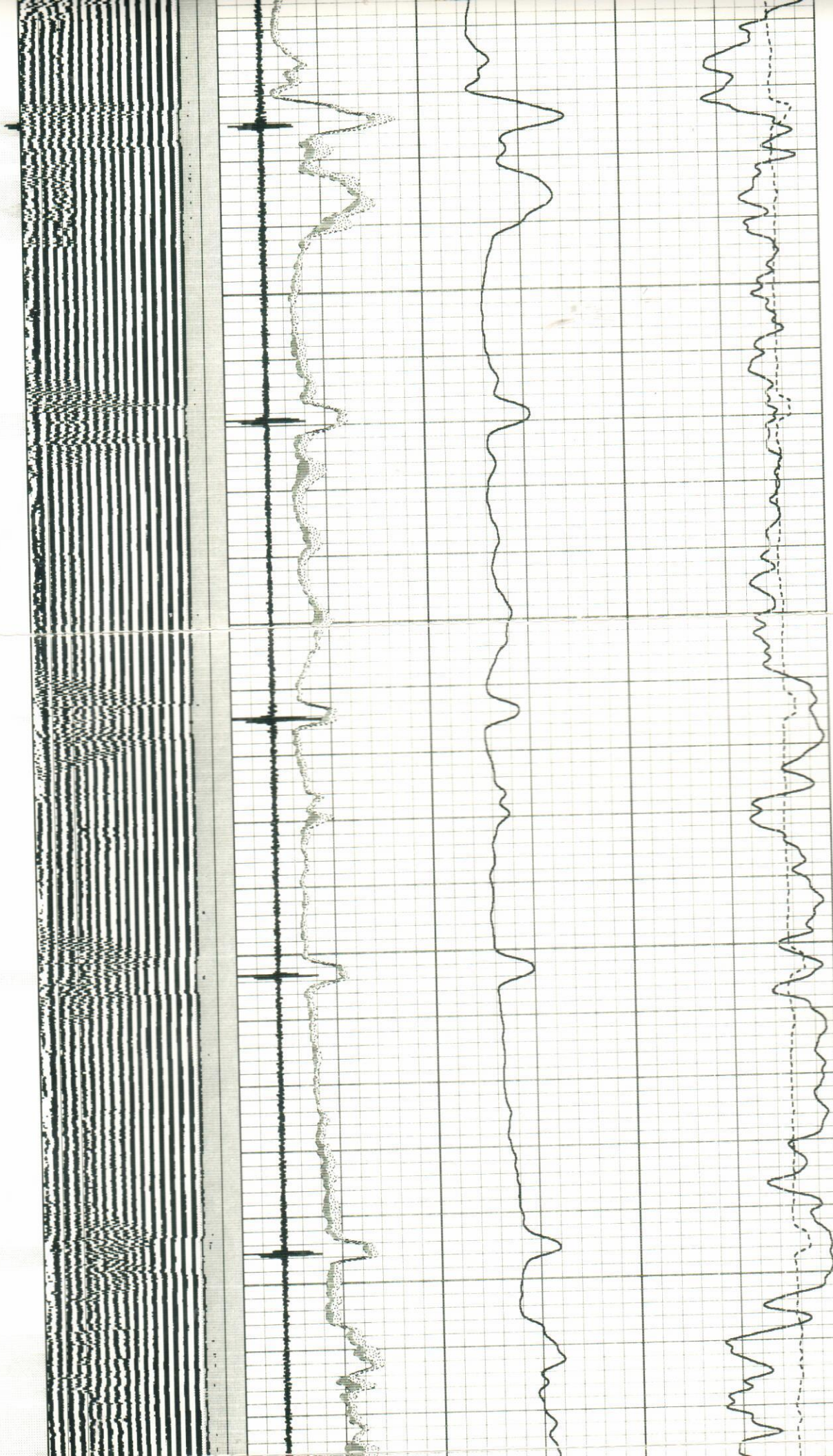


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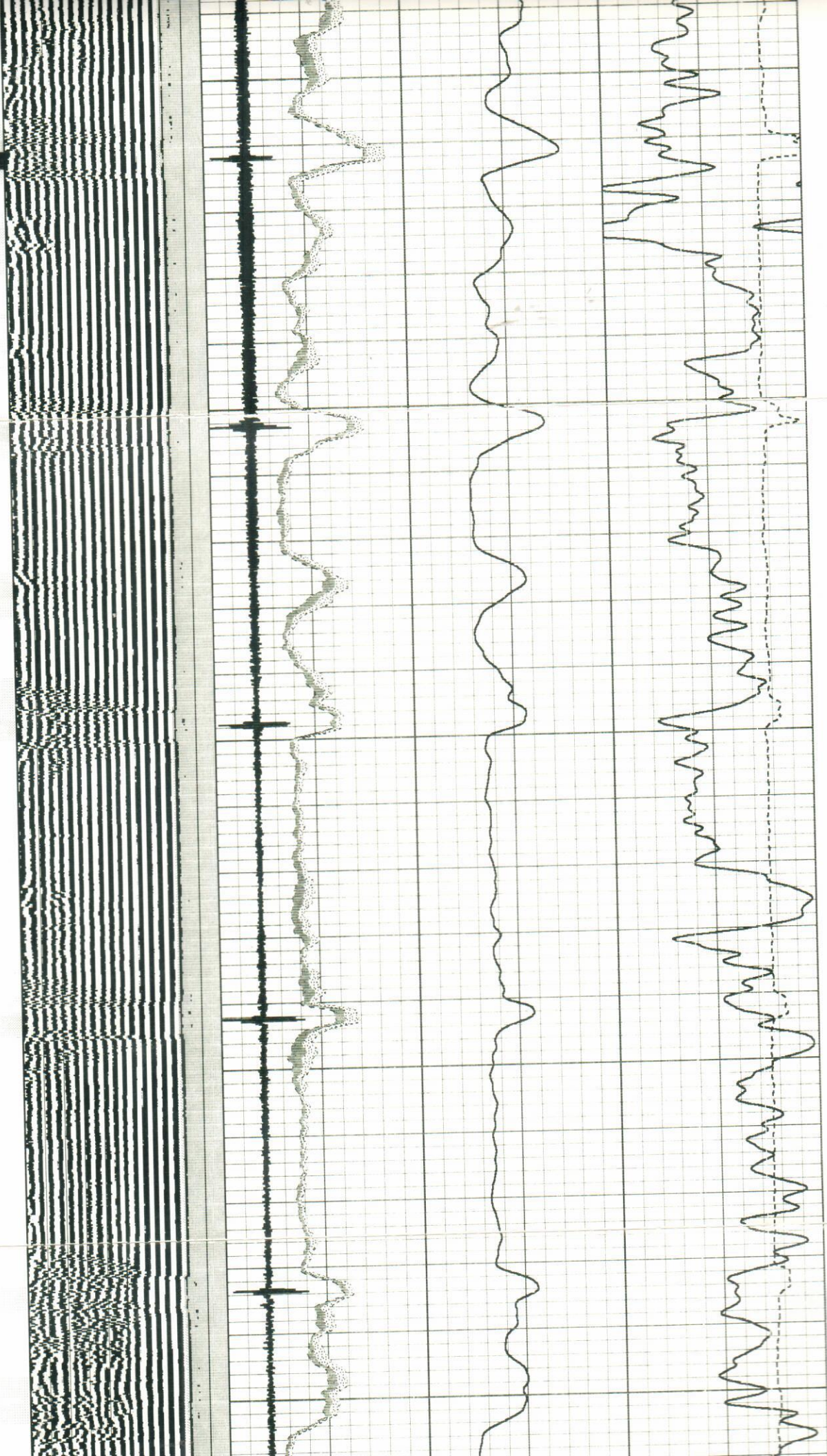
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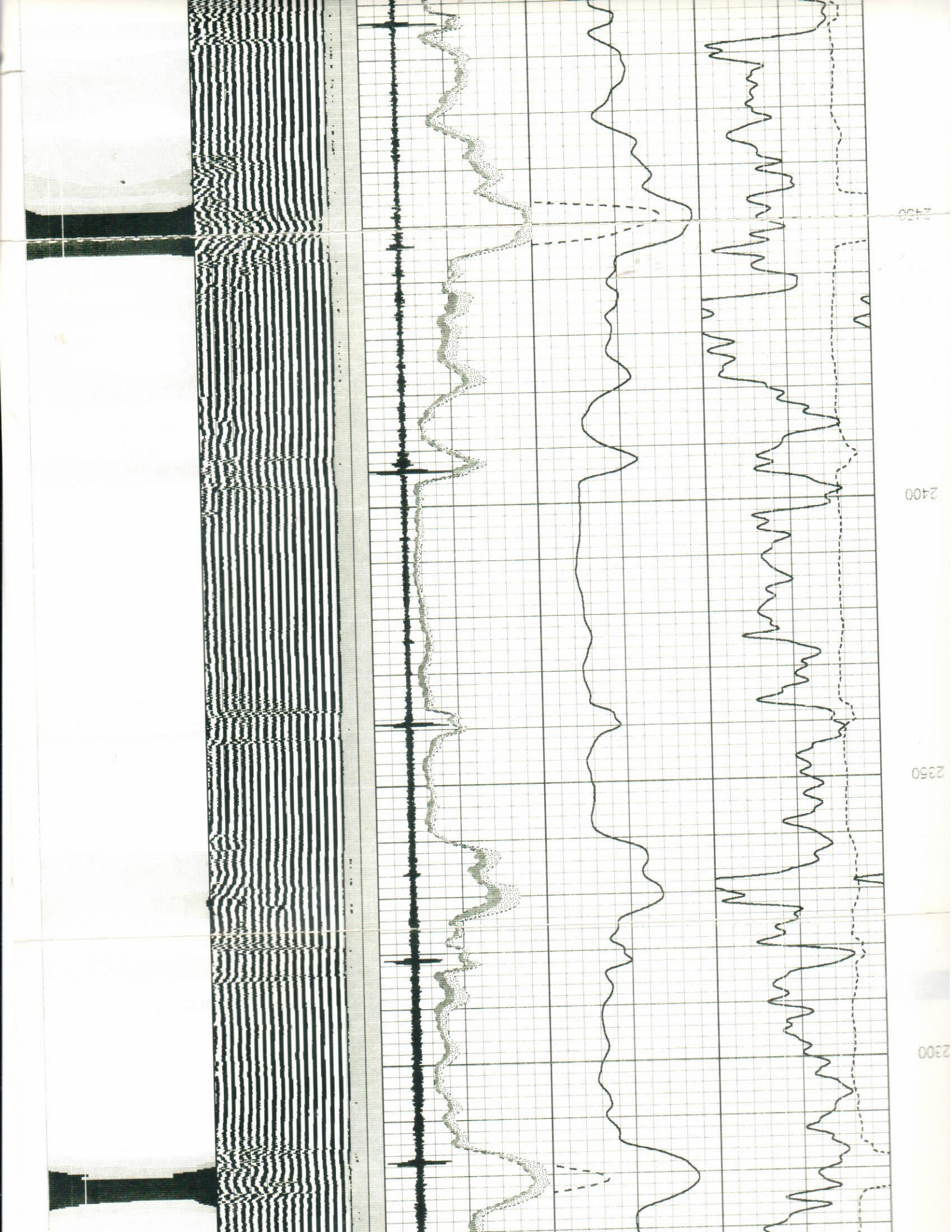


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2400

2350

2300



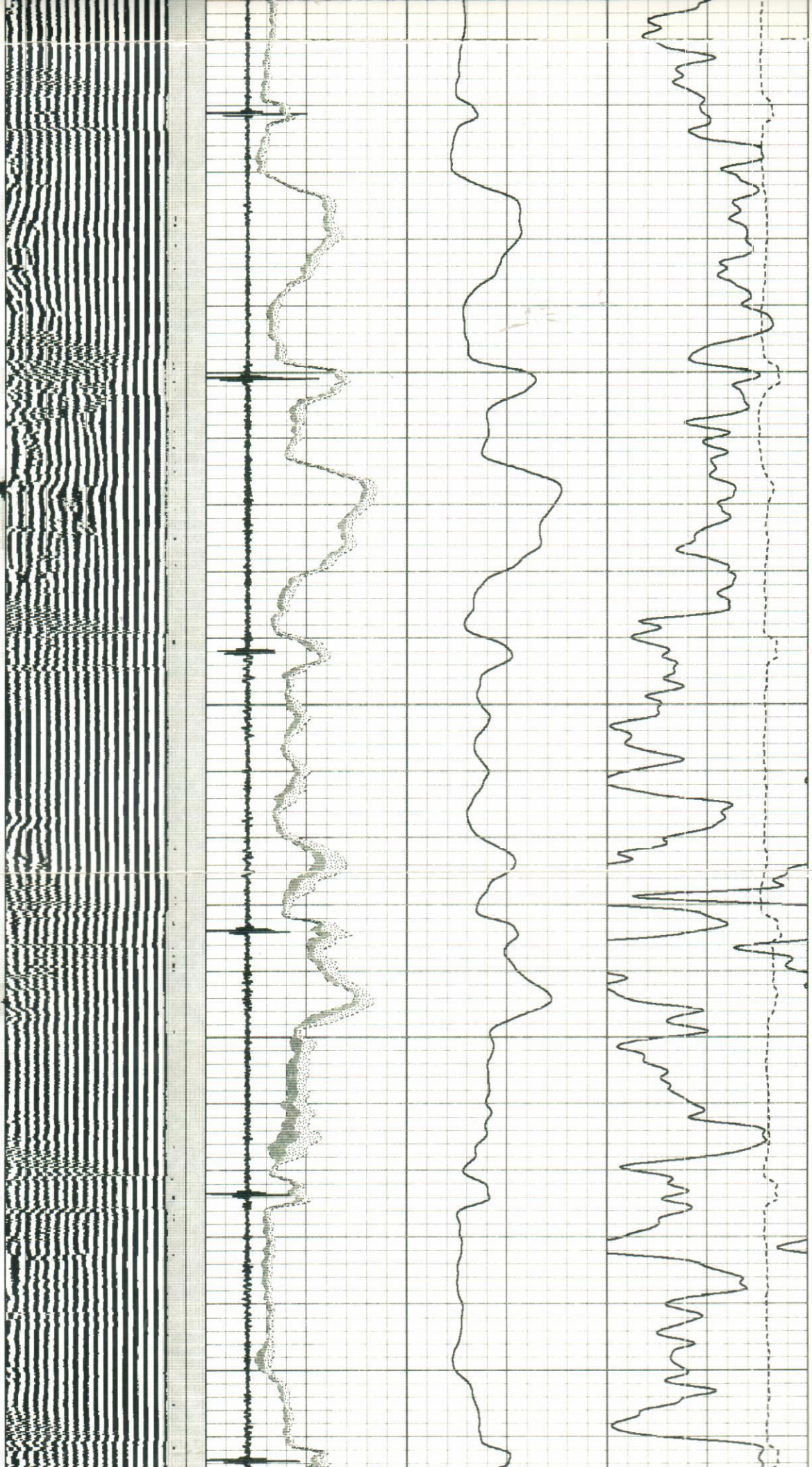
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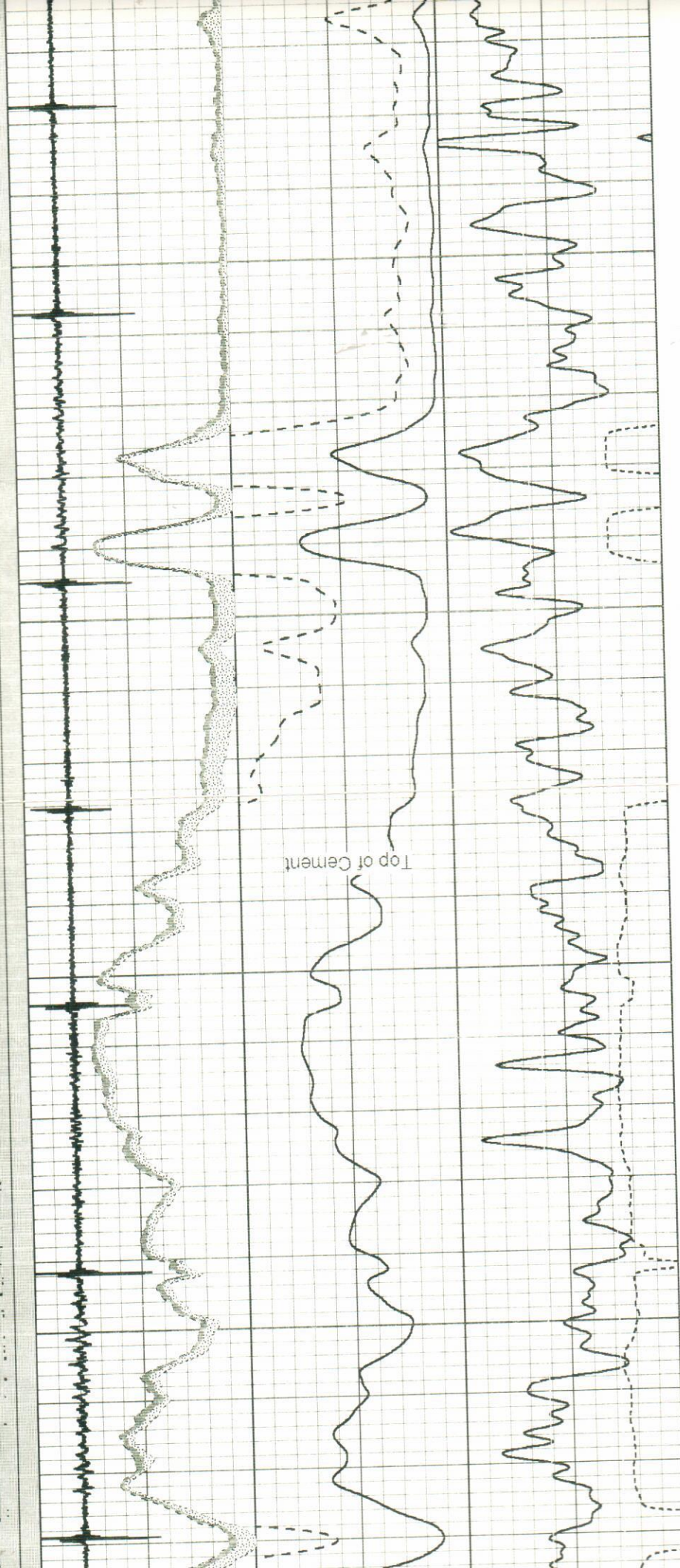


2900

2850

2800

2750



Top of Cement

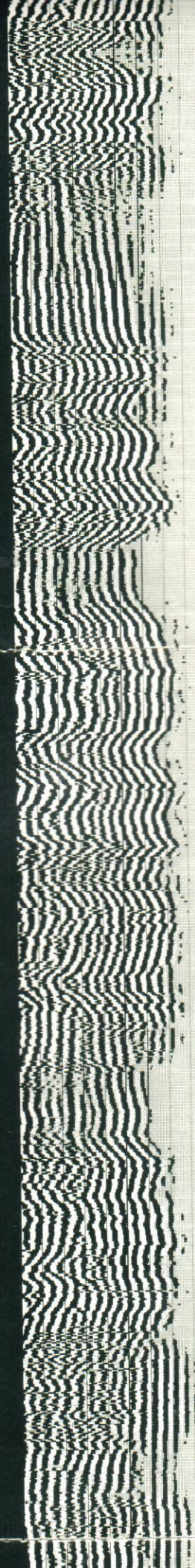
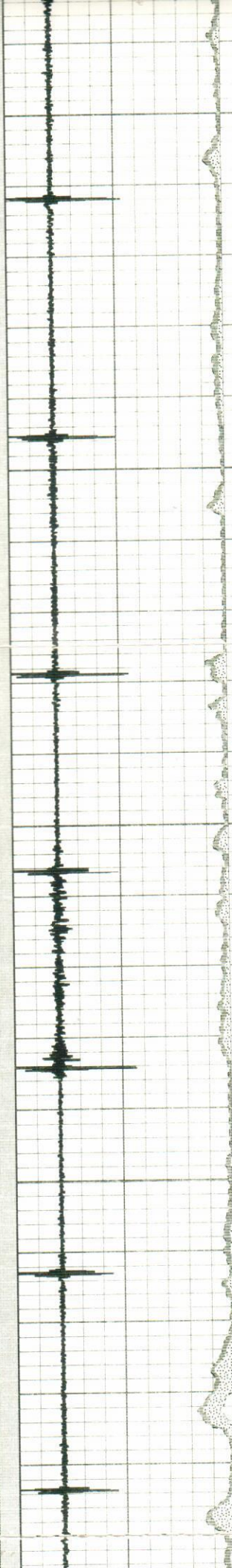
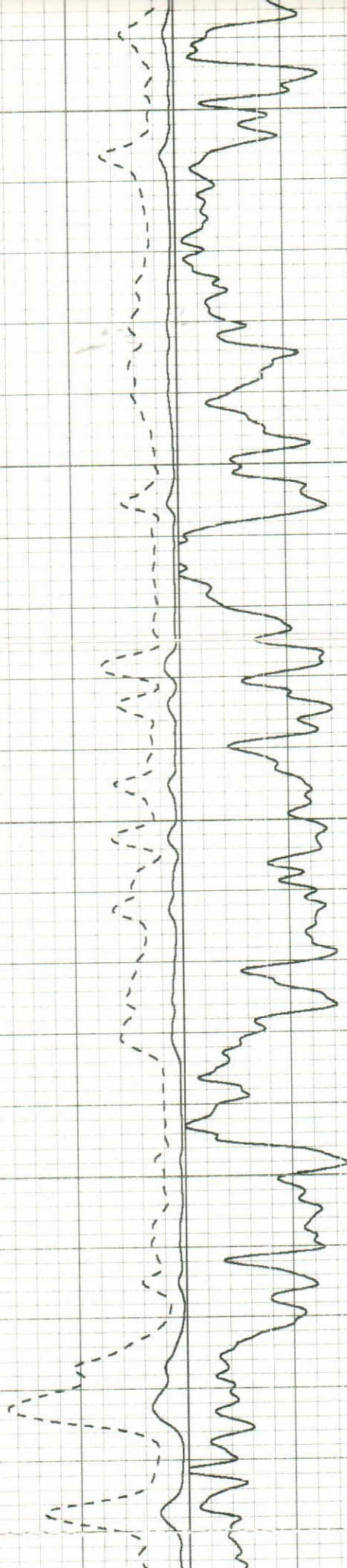
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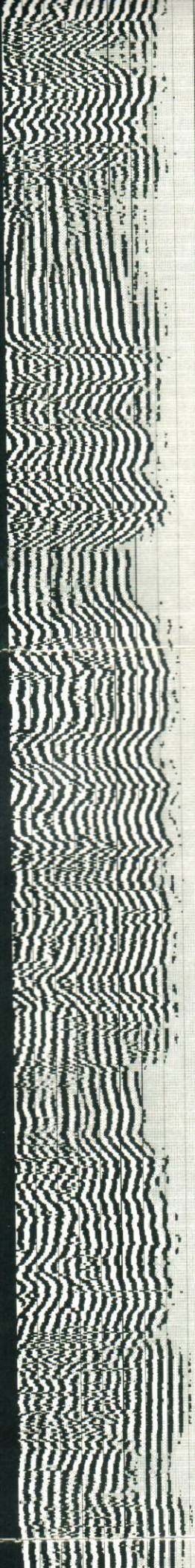
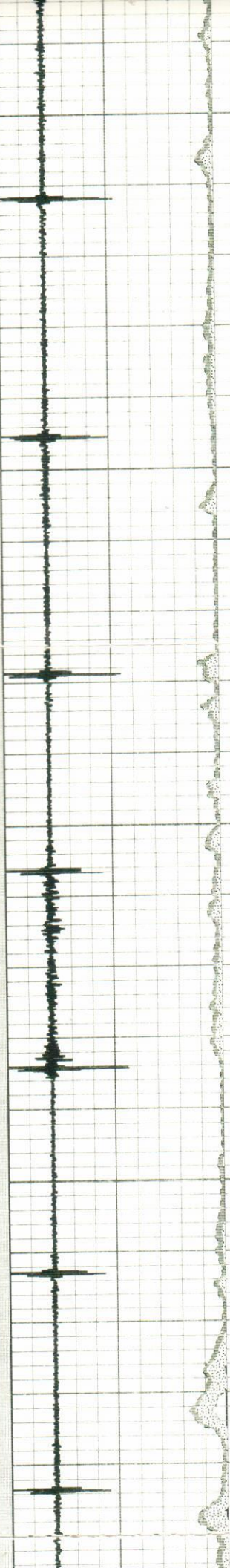
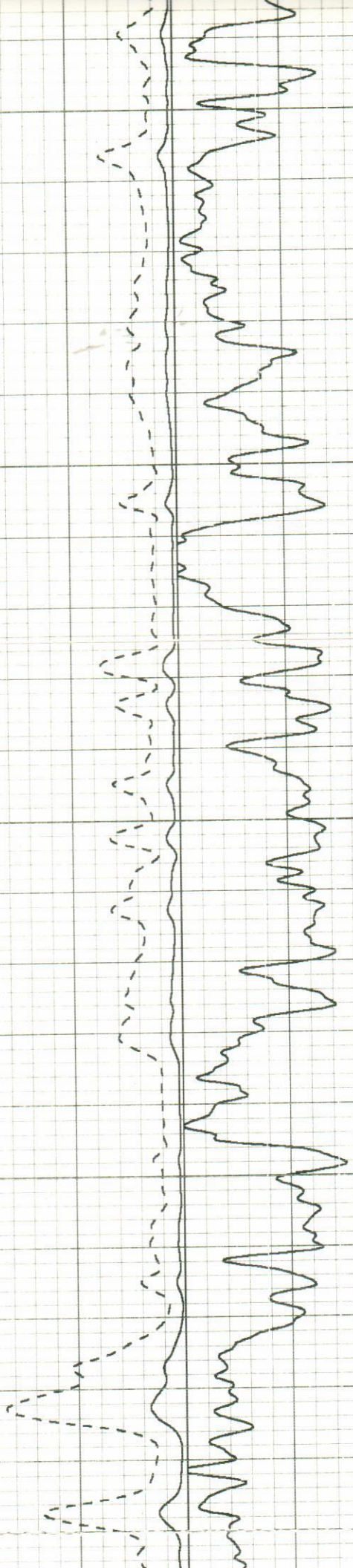
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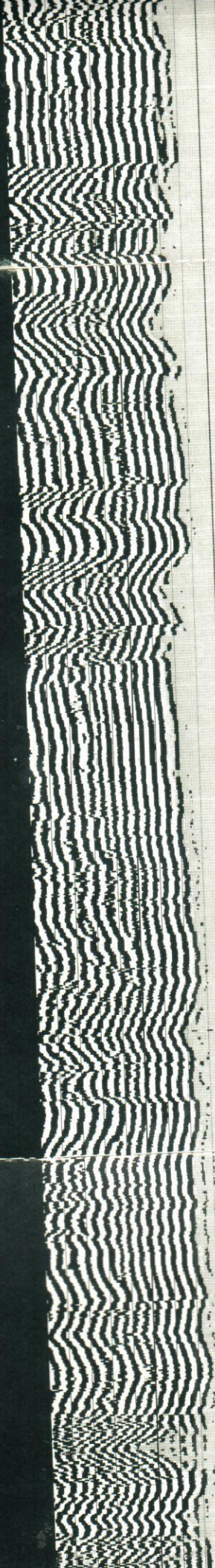
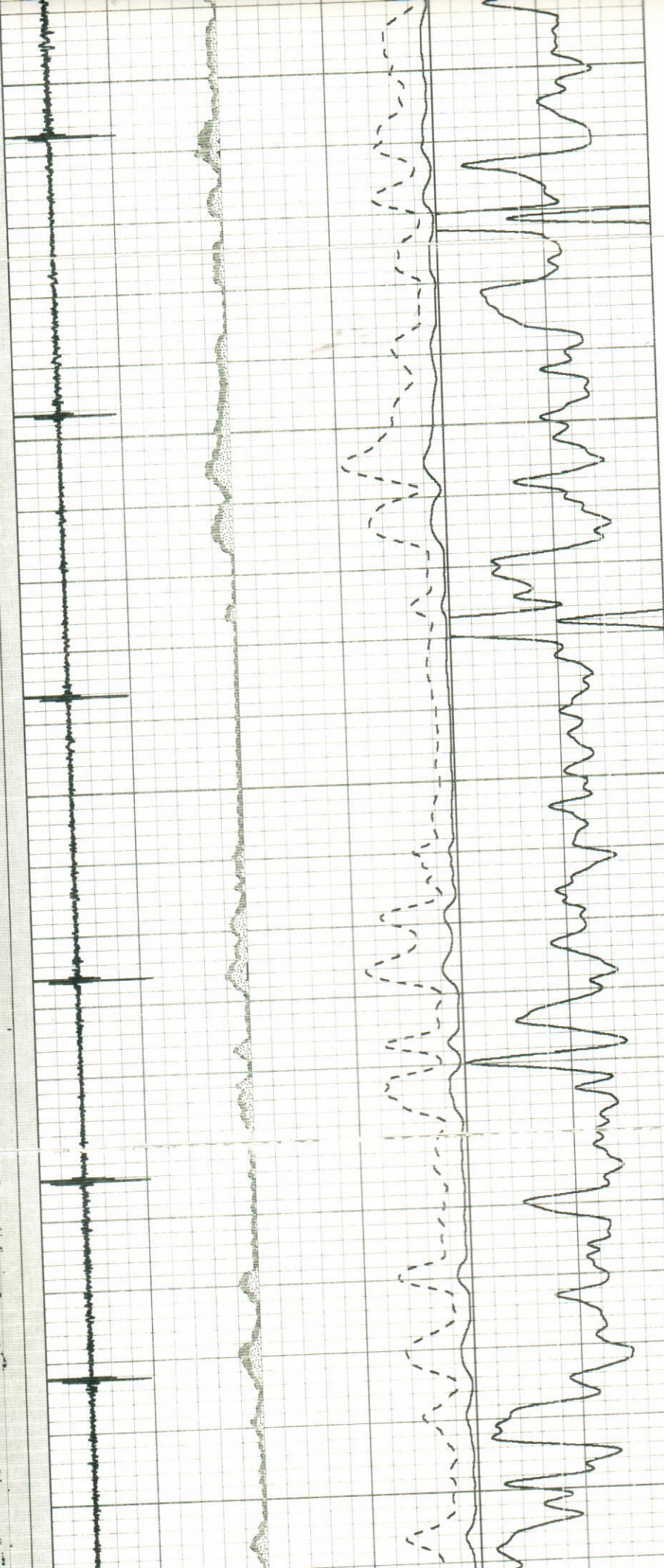


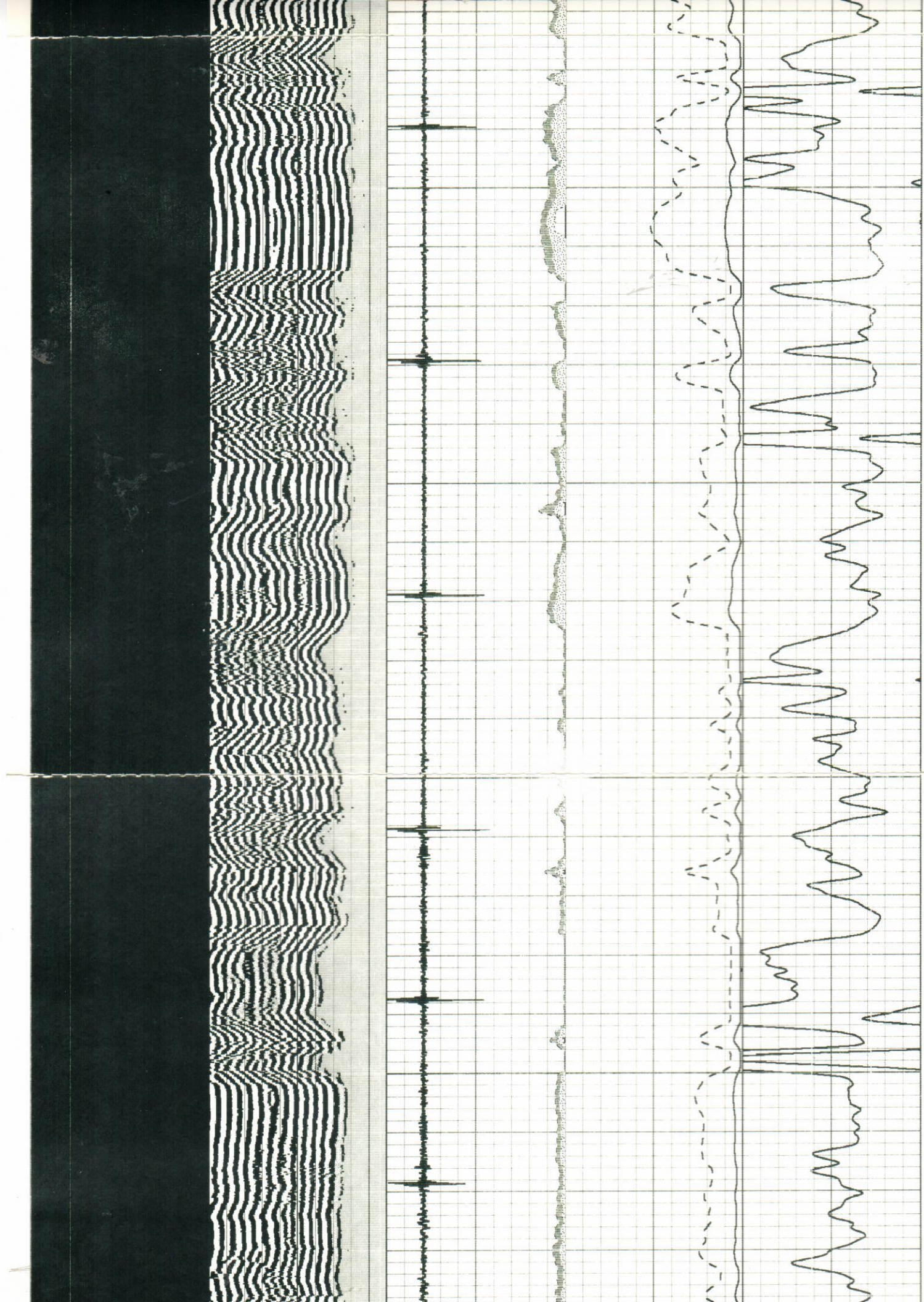
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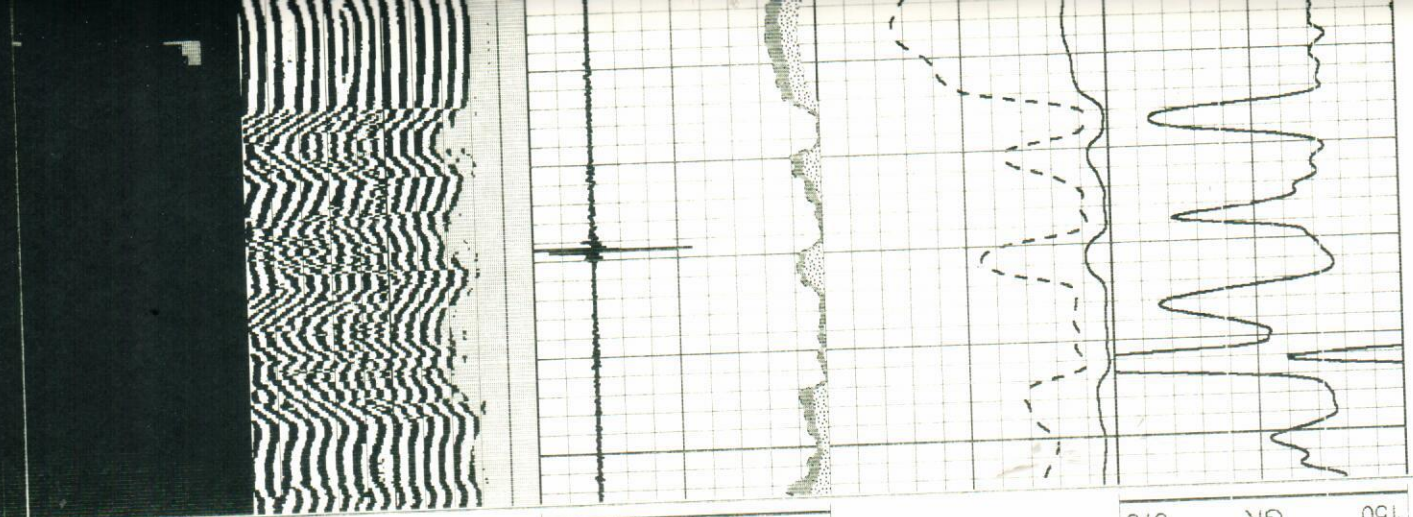
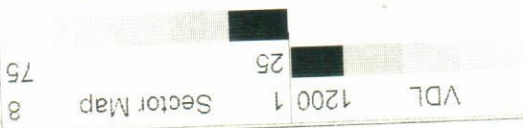
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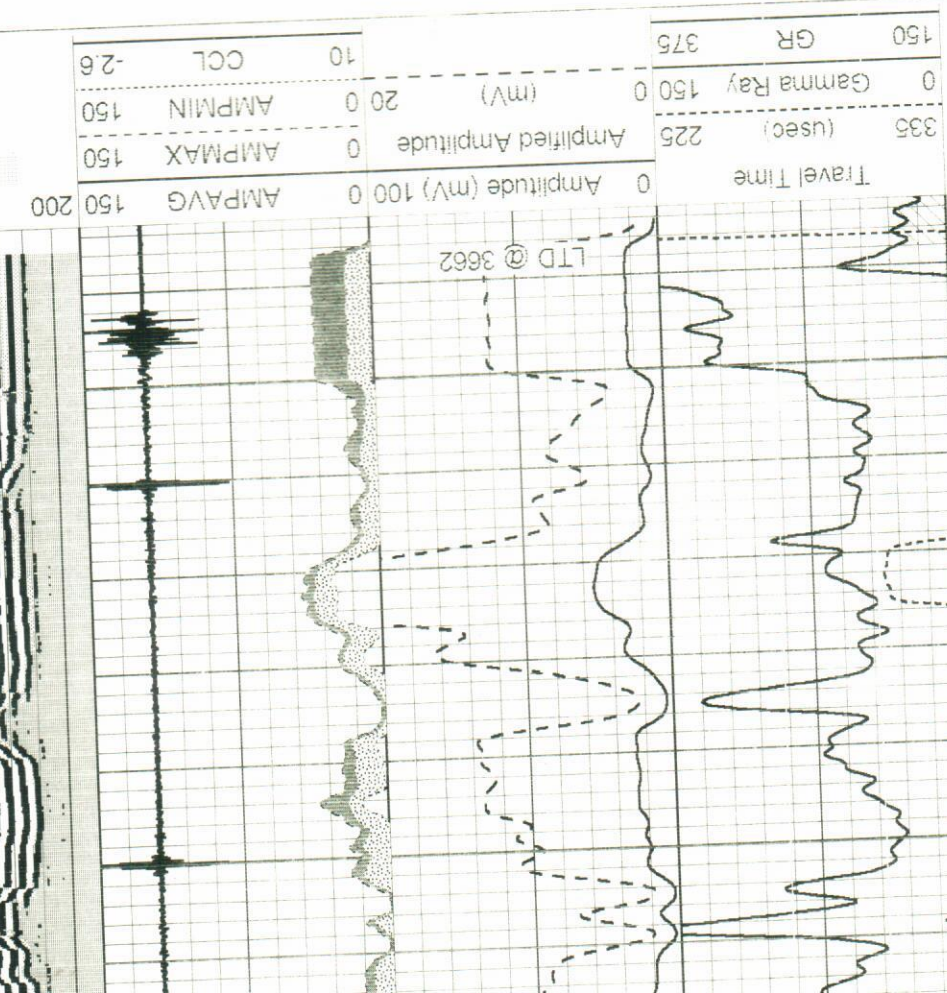
Repeat Section

Database File: greg-whitehair.db
Dataset Pathname: sgicbl/pass5
Presentation Format: scbl
Dataset Creation: Mon Jul 19 09:44:48 2010 by Log Std Casedhole 08121
Charted by: Depth in Feet scaled 1:240

Travel Time	0	Amplitude (mV)	100	0	AMPAVG	150	200
	0	Amplified Amplitude	0	0	AMPMAX	150	
	335	(usec)	225	0	AMPMIN	150	
	0	Gamma Ray	150	0	CCL	-2.6	
	150	GR	375	10			

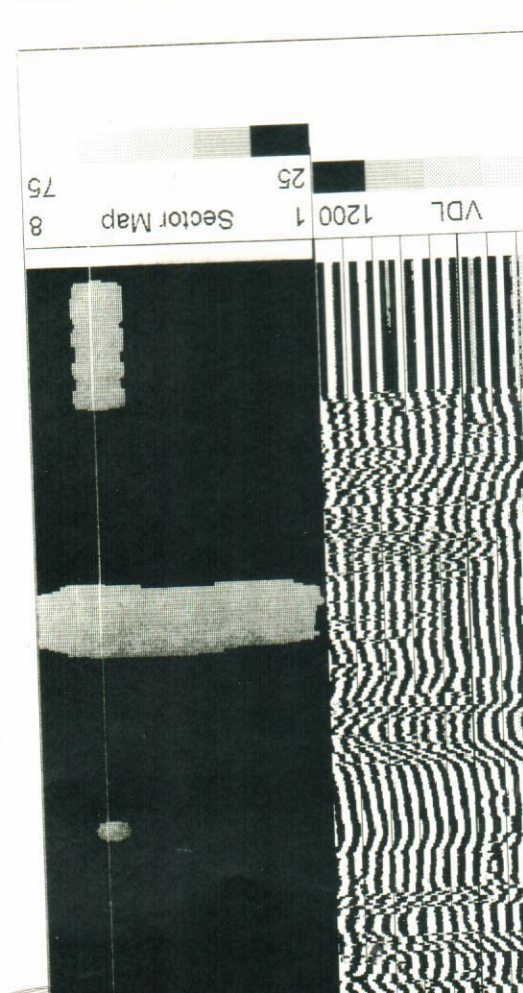


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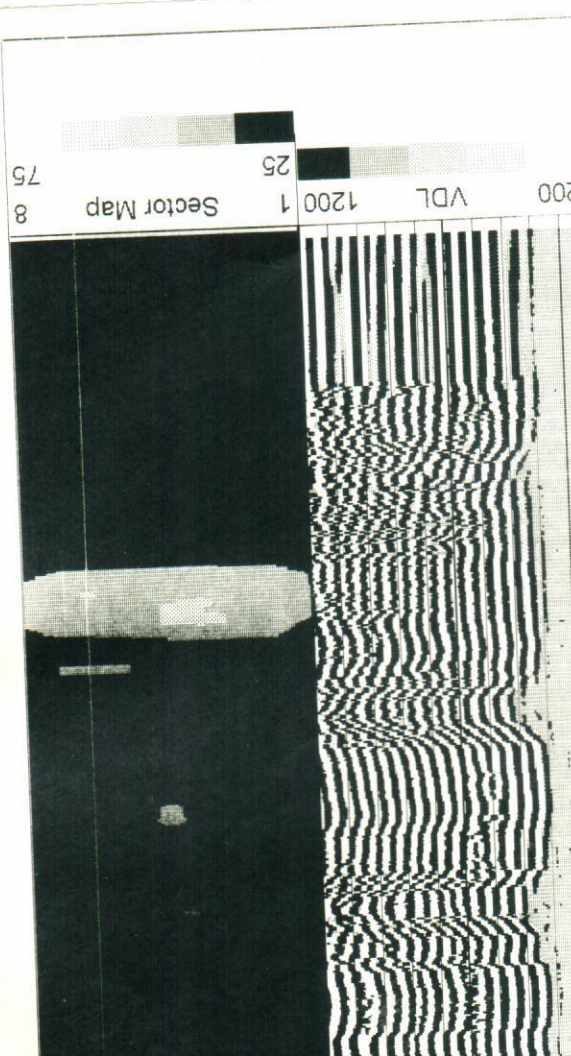
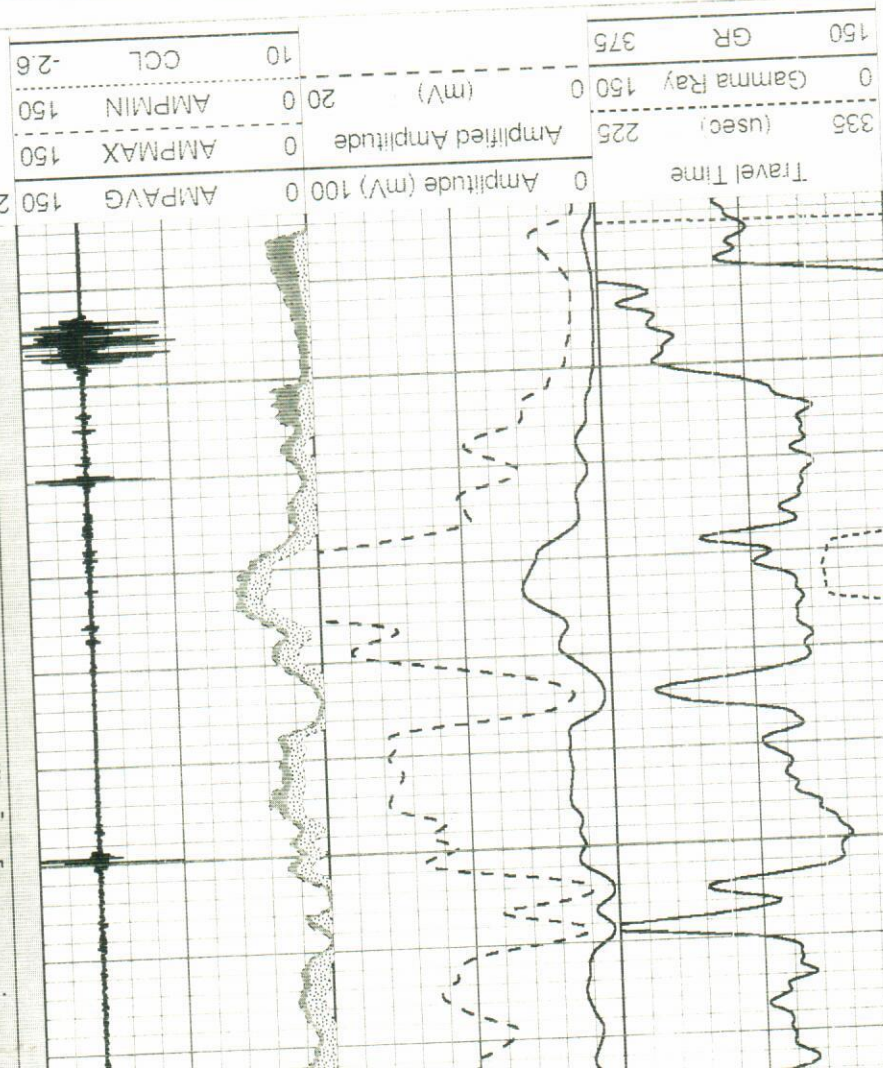
3650

3600



3650

3600



Sector Map 8 75

April 18, 2017

Greg Whitehair
ARDC INC.
108 W 34TH ST
HAYS, KS 67601-1629

Re: Plugging Application
API 15-051-19190-00-01
JACQUES 1
NE/4 Sec.12-13S-20W
Ellis County, Kansas

Dear Greg Whitehair:

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) 261-6250. 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 October 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 October 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 4