

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	Pickrell Drilling Company, Inc.
Well Name	LAFON TRUST B 1
Doc ID	1357994

Perforations And Bridge Plug Sets

Perforation Top	Perforation Base	Formation	Bridge Plug Depth
4544	4548	Mississippi	
4482	4484	Mississippi	
4496	4500	Mississippi	



DUAL COMP POROSITY LOG

Company PICKRELL DRILLING COMPANY, INC.
 Well LAFON TRUST B #1
 Field RANSOM NW
 County NESS
 State KANSAS

Company PICKRELL DRILLING COMPANY, INC.
 Well LAFON TRUST B #1
 Field RANSOM NW
 County NESS State KANSAS

Location: 2135' FNL & 1255' FEL
 SEC 17 TWP 16S RGE 24W
 Permanent Datum GROUND LEVEL Elevation 2500'
 Log Measured From KELLY BUSHING
 Drilling Measured From KELLY BUSHING
 Other Services DIL/MEL
 Elevation K.B. 2507', D.F. N/A, G.L. 2500'

Date	5/6/2017
Run Number	ONE
Type Log	CNL/CDL
Depth Driller	4600'
Depth Logger	4598'
Bottom Logged Interval	4569'
Top Logged Interval	3700'
Type Fluid In Hole	CHEMICAL
Salinity, PPM CL	3300
Density	9.4
Level	FULL
Max. Rec. Temp. F	122
Operating Rig Time	3 HOURS
Equipment -- Location	91 HAYS
Recorded By	D. SCHMIDT
Witnessed By	AARON YOUNG

Run No.	Bit	Borehole Record		Casing Record	
		From	To	From	To
ONE	12.25"	0'	207'	8.625"	23#
TWO	7.875"	207'		TD	

<<< Fold Here >>>

All interpretations are opinions based on inferences from electrical or other measurements and Pioneer Wireline Services, LLC cannot and does not guarantee the accuracy or correctness of any interpretation, and Pioneer Wireline Services, LLC will not 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.

Comments
 N/A DENOTES NOT AVAILABLE OR NON-APPLICABLE.
 RANSOM,
 3 WEST,
 1 NORTH, 1/4 WEST,
 NORTH INTO
 Log Measured From: KELLY BUSHING 7 Ft. Above Permanent Datum
 THANK YOU FOR USING PIONEER ENERGY SERVICES
 www.pioneerenergy.com 785-625-3858

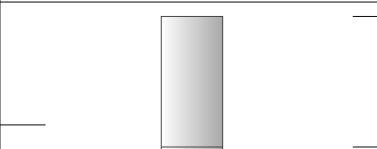
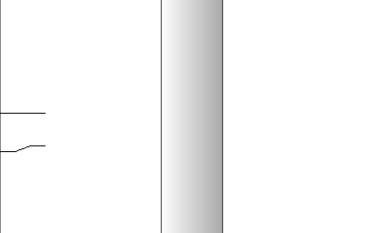
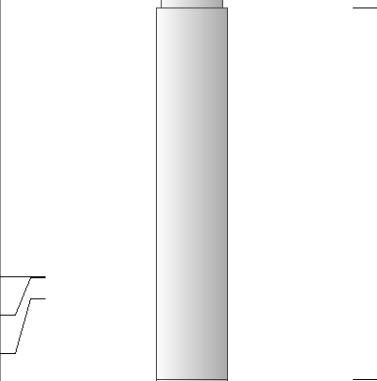
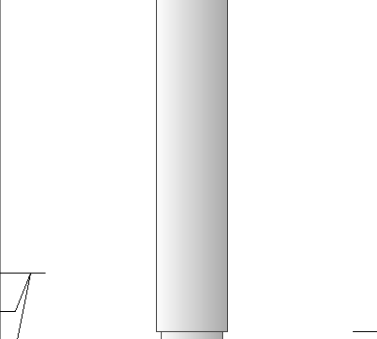
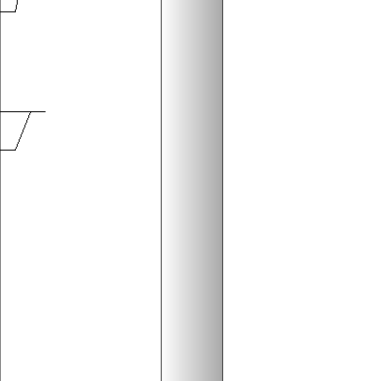
Your Pioneer Energy Services Crew	This Log Record Was Witnessed By
Engineer: D. SCHMIDT	Primary Witness: AARON YOUNG
Operator:	Secondary Witness:
Operator:	Secondary Witness:
Operator:	Secondary Witness:

Log Variables

Database C:\ProgramData\Warrior\Data\pickrell drilling_lafon trust_b 1.db
 Dataset field/well/STKML/pass3.1/_vars_

Top - Bottom

M	A	SZCOR	NPORSEL	FLUIDDEN g/cc	MATRXDEN g/cc	SPSHIFT mV	SNDERRM mmho/m
2	1	Off	Limestone	1	2.71	340	0
SNDERR mmho/m	SRFTEMP degF	CASETHCK in	CASEOD in	PERFS	TDEPTH ft	BOTTEMP degF	BOREID in
0	80	0	5.5	0	4598	122	7.875

Sensor	Offset (ft)	Schematic	Description	Length (ft)	O.D. (in)	Weight (lb)
GR	40.58		GR-M&W (89)	3.00	3.50	50.00
CNLSC CNSSC	37.48 36.73		CNT-M&W (207-MW)	5.50	3.50	100.00
LSD DCAL SSD	28.43 28.42 27.93		CDL-M&W (90-1031)	8.50	4.00	250.00
MCAL MI MN	19.83 19.83 19.83		ML-PSIML (PSI-01) GO Micro log tools converted to Simplec electronics	7.58	4.00	65.00
RLL3F RLL3	15.80 15.80					

CILD 8.00

CILM 4.70

SP 0.20

DIL-M&W (PSI 91)

18.50

3.50

220.00

Dataset: pickrell drilling_lafon trust_b 1.db: field/well/STKML/pass3.1
 Total length: 43.08 ft
 Total weight: 685.00 lb
 O.D.: 4.00 in



MAIN PASS

Database File: pickrell drilling_lafon trust_b 1.db
 Dataset Pathname: STKML/pass3.1
 Presentation Format: cdl
 Dataset Creation: Sat May 06 18:55:52 2017
 Charted by: Depth in Feet scaled 1:600

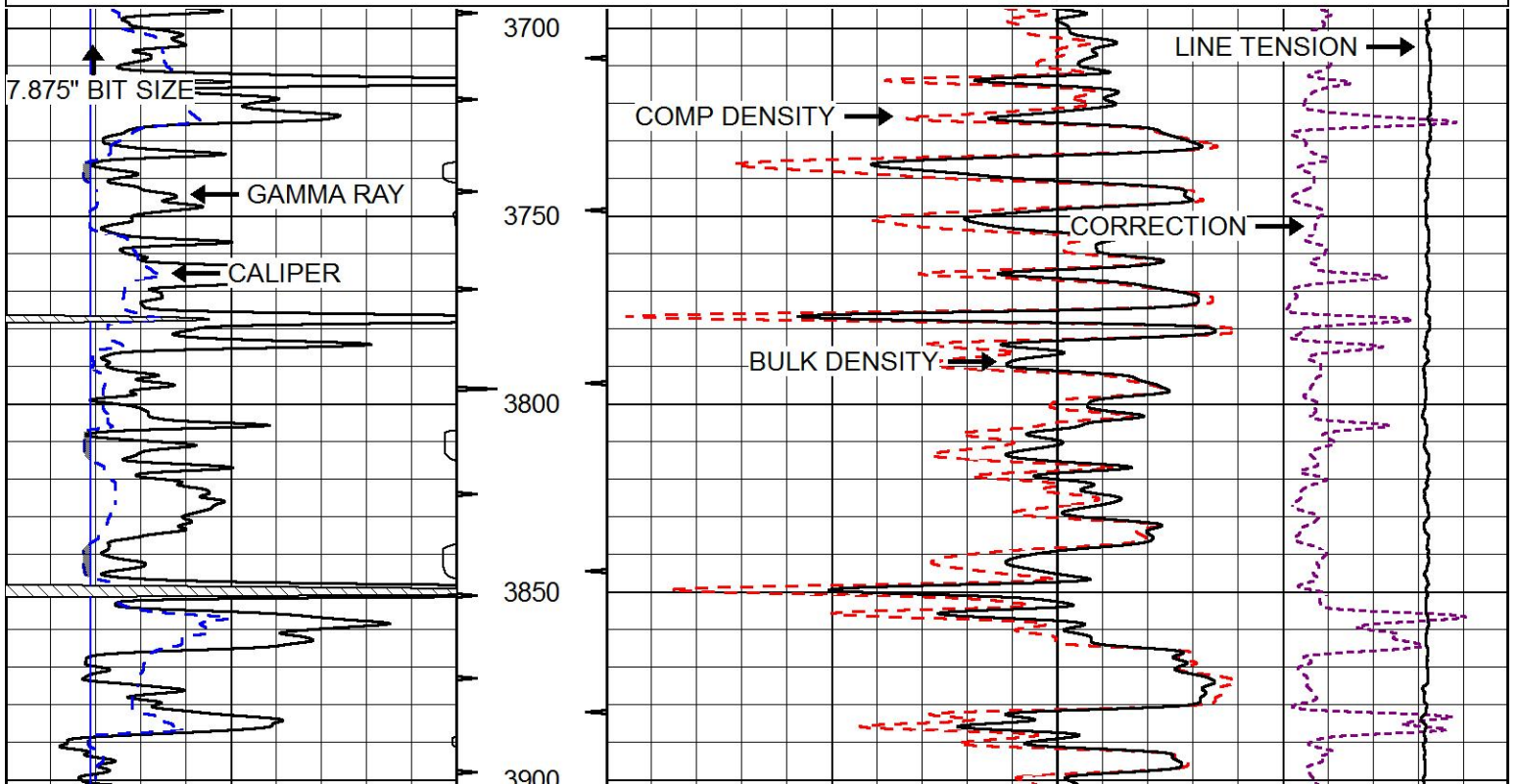
0	Gamma Ray (GAPI)	150
6	Caliper (in)	16

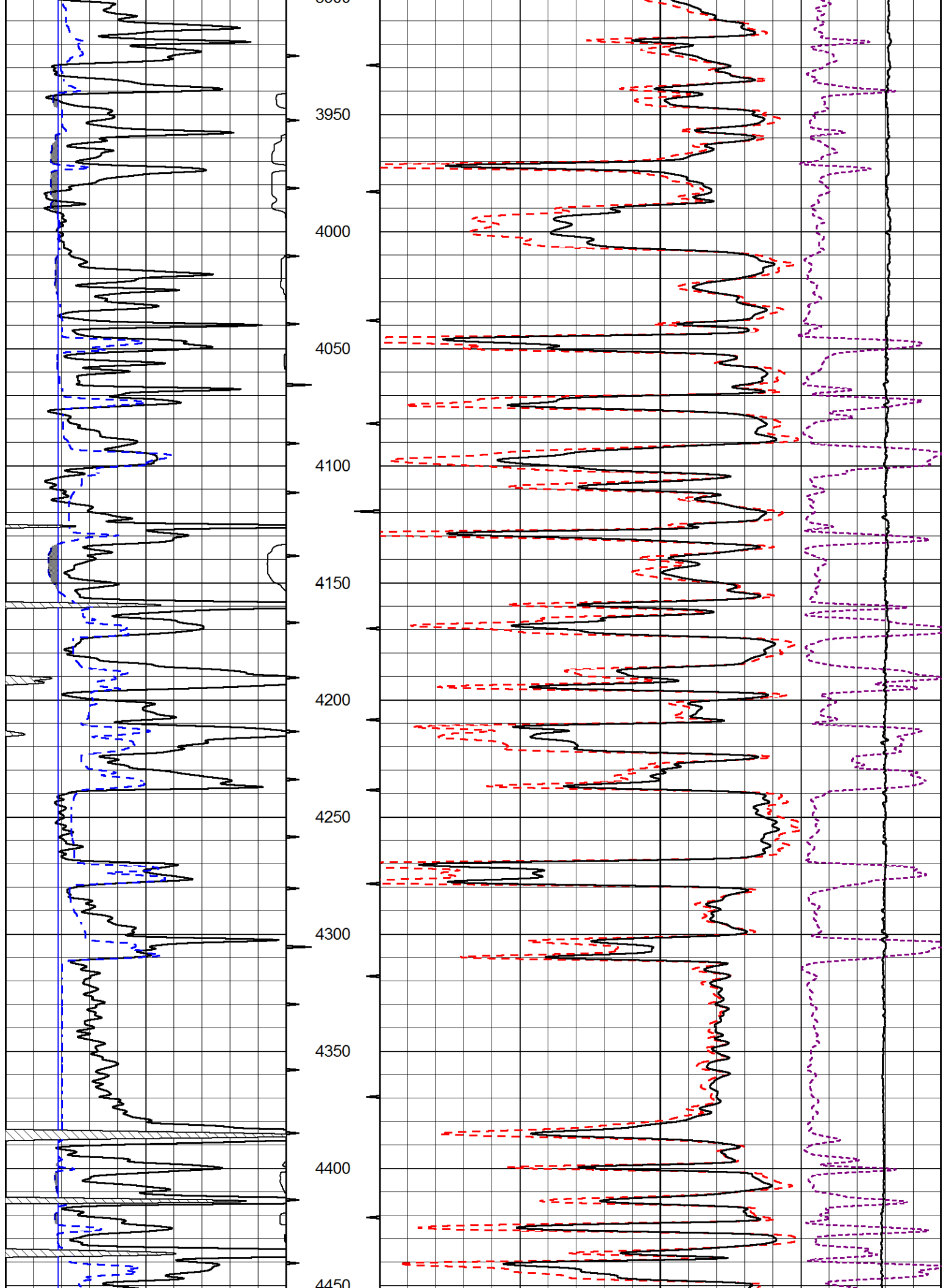
Compensated Density (2.71 MA)	
30	(pu) -10

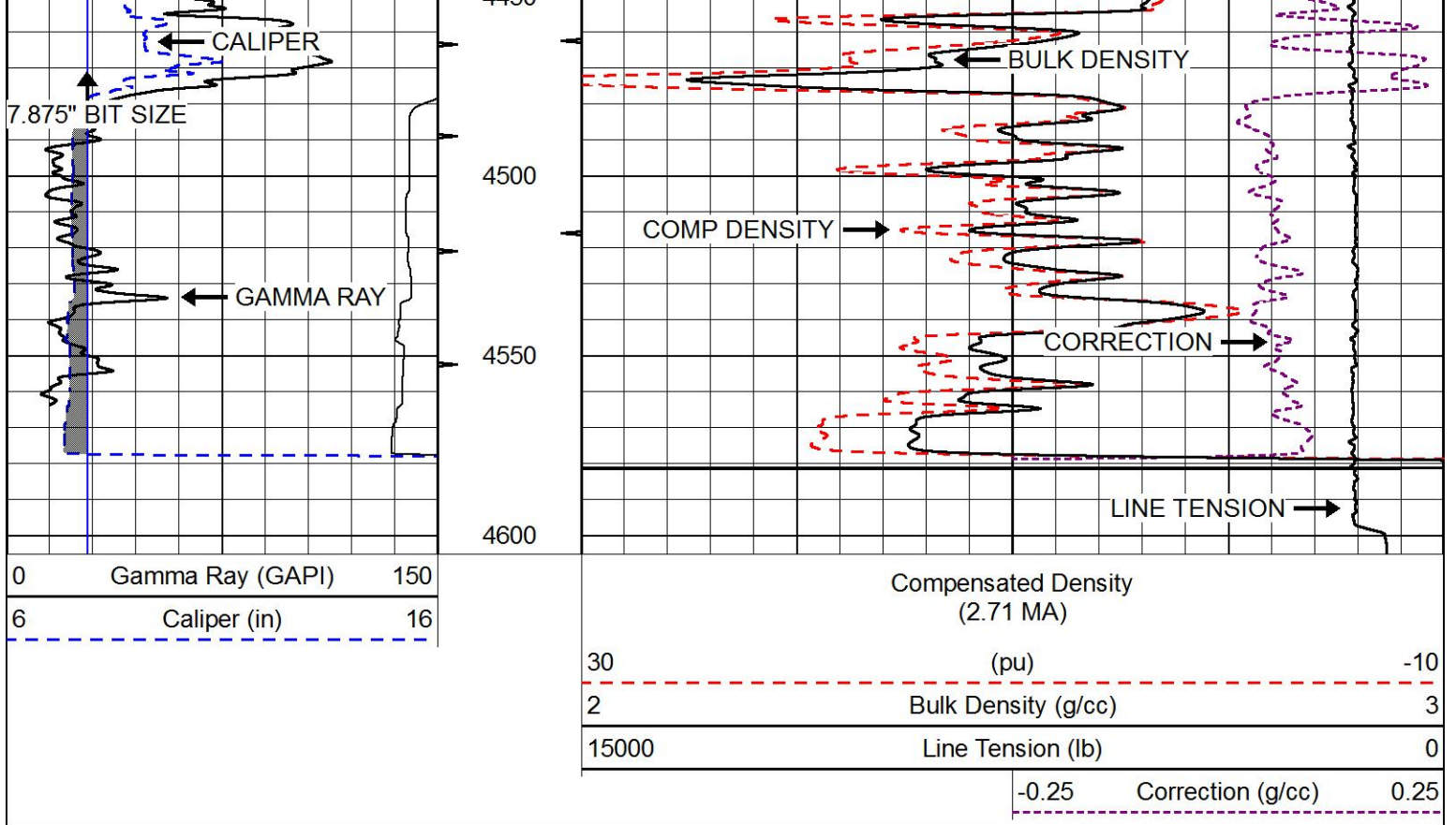
2	Bulk Density (g/cc) 3

15000	Line Tension (lb) 0

-0.25	Correction (g/cc) 0.25

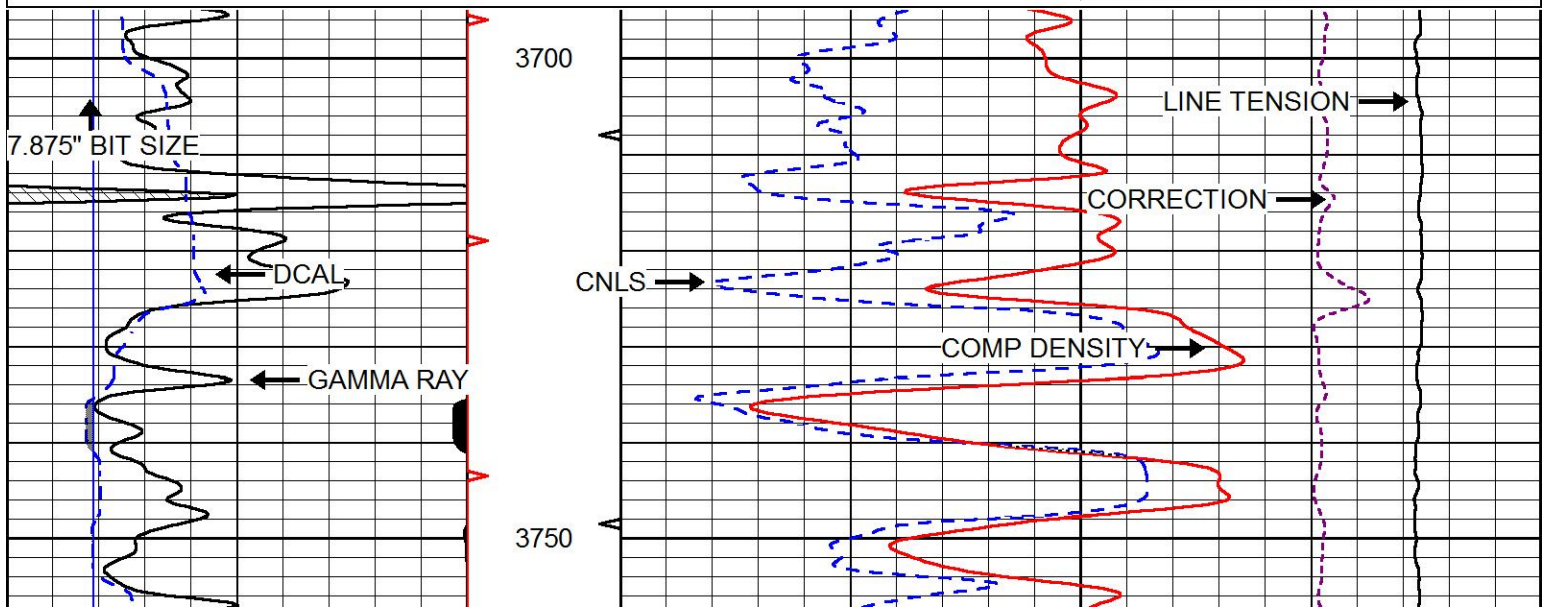
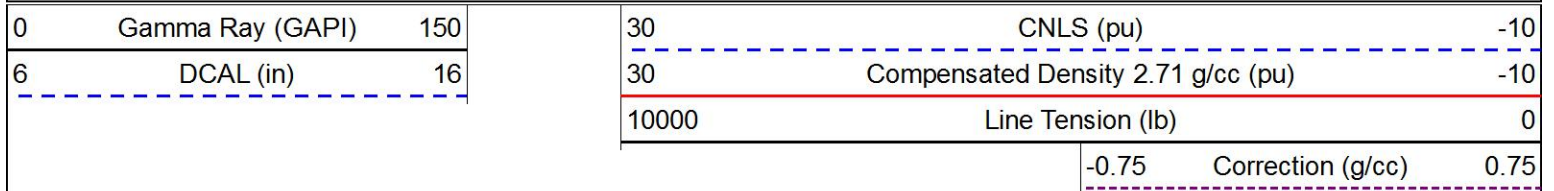


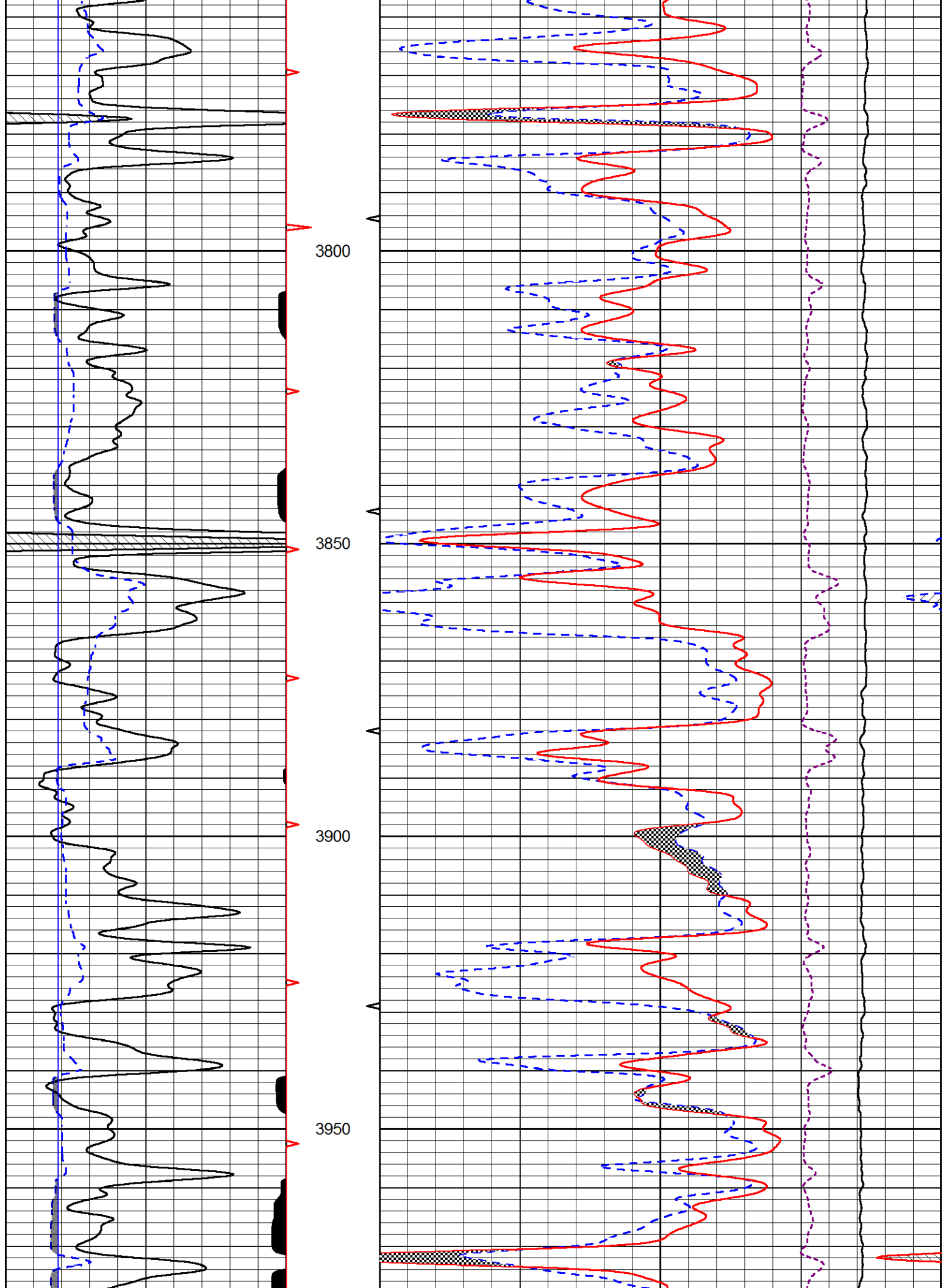


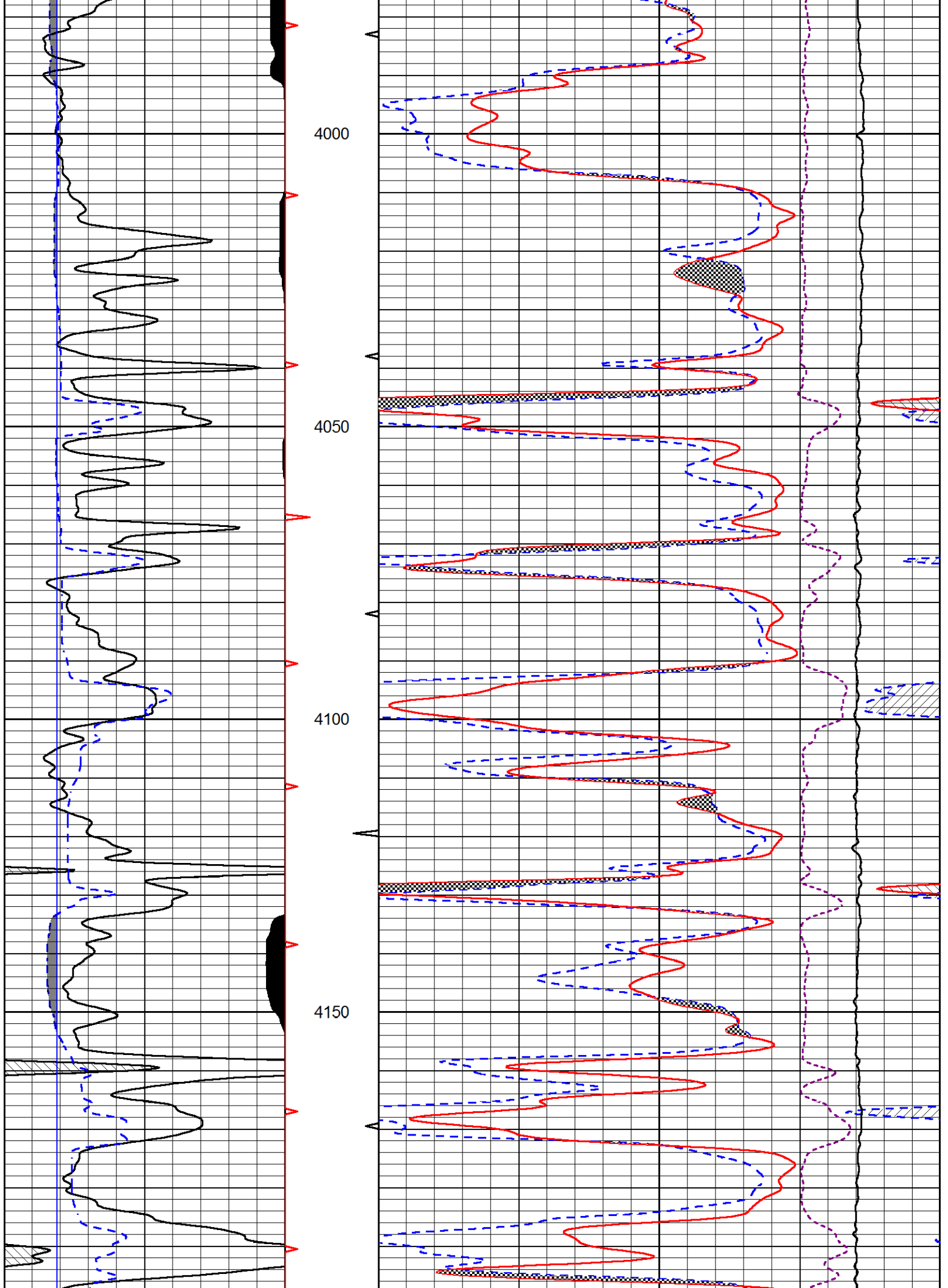


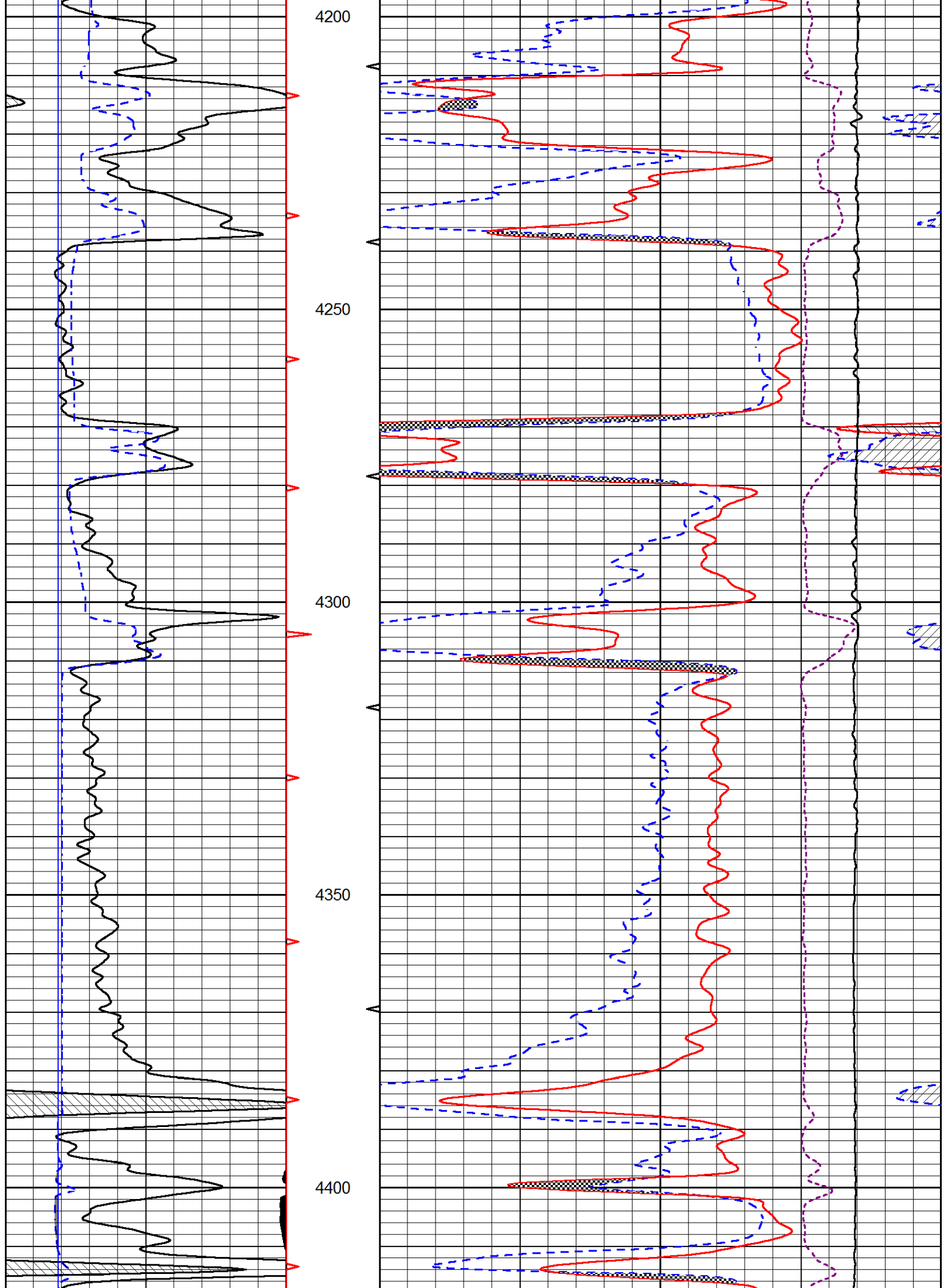
MAIN PASS

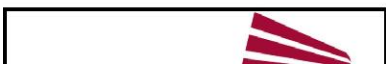
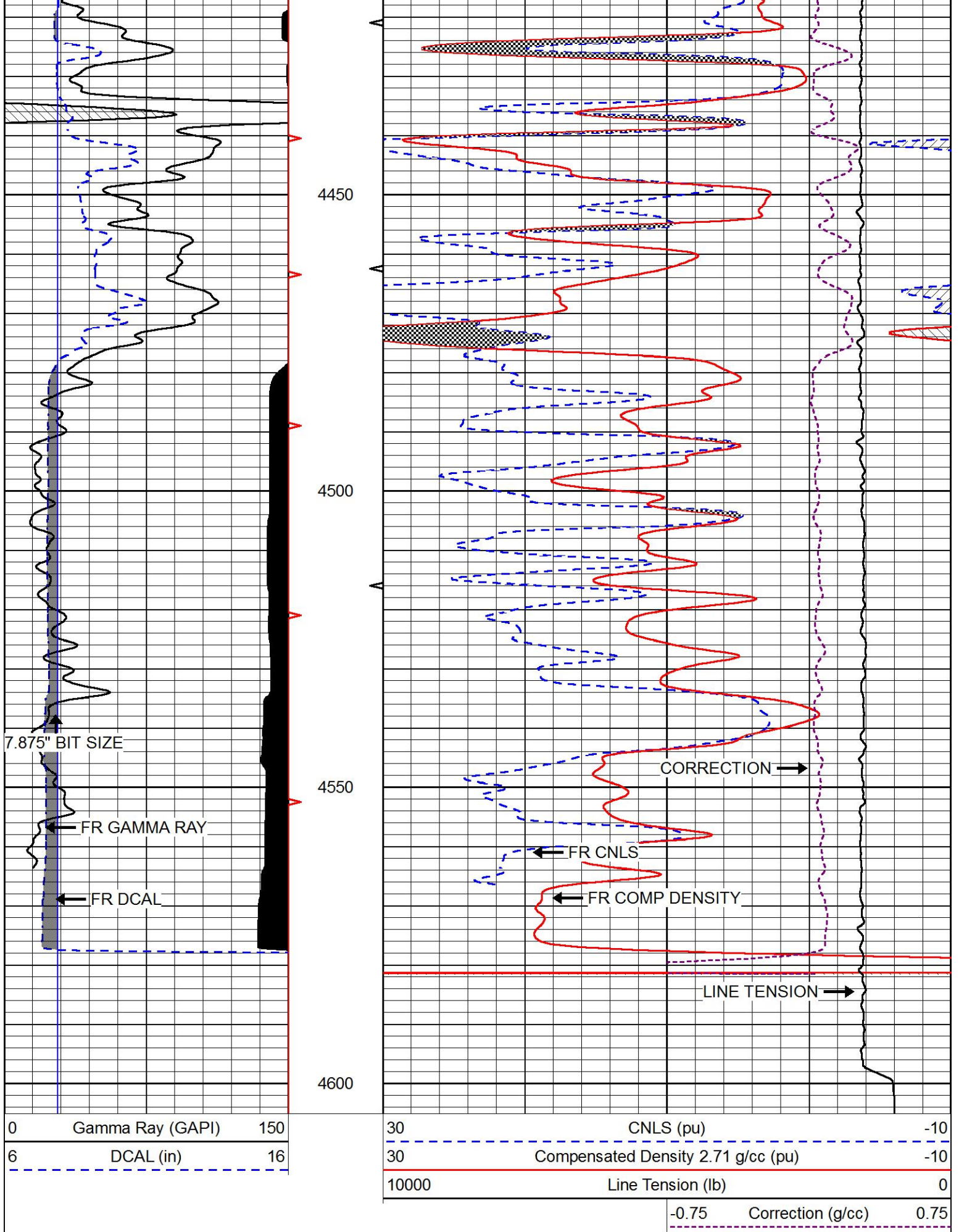
Database File pickrell drilling_lafon trust_b 1.db
 Dataset Pathname STKML/pass3.1
 Presentation Format cndlspec
 Dataset Creation Sat May 06 18:55:52 2017
 Charted by Depth in Feet scaled 1:240









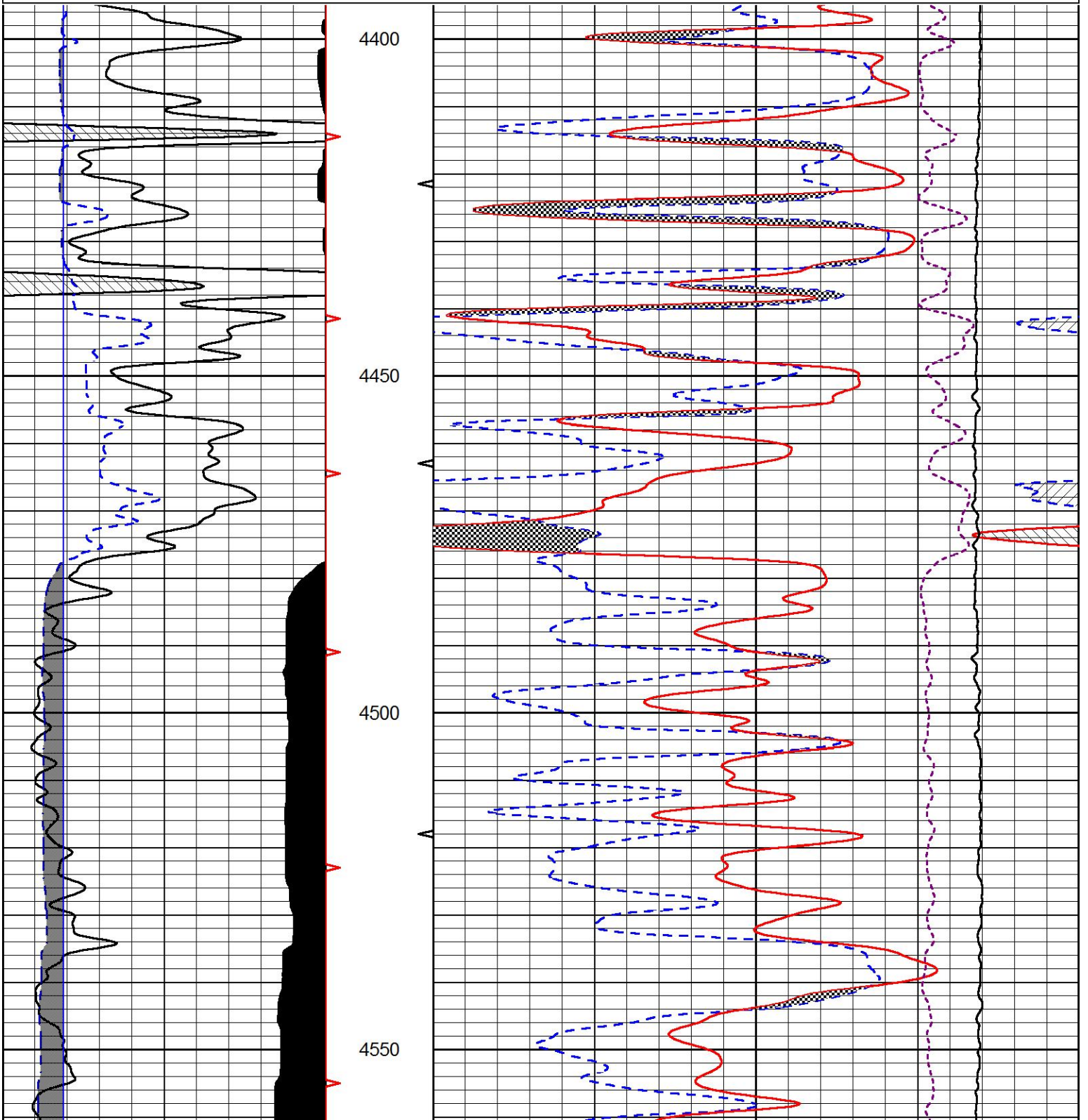


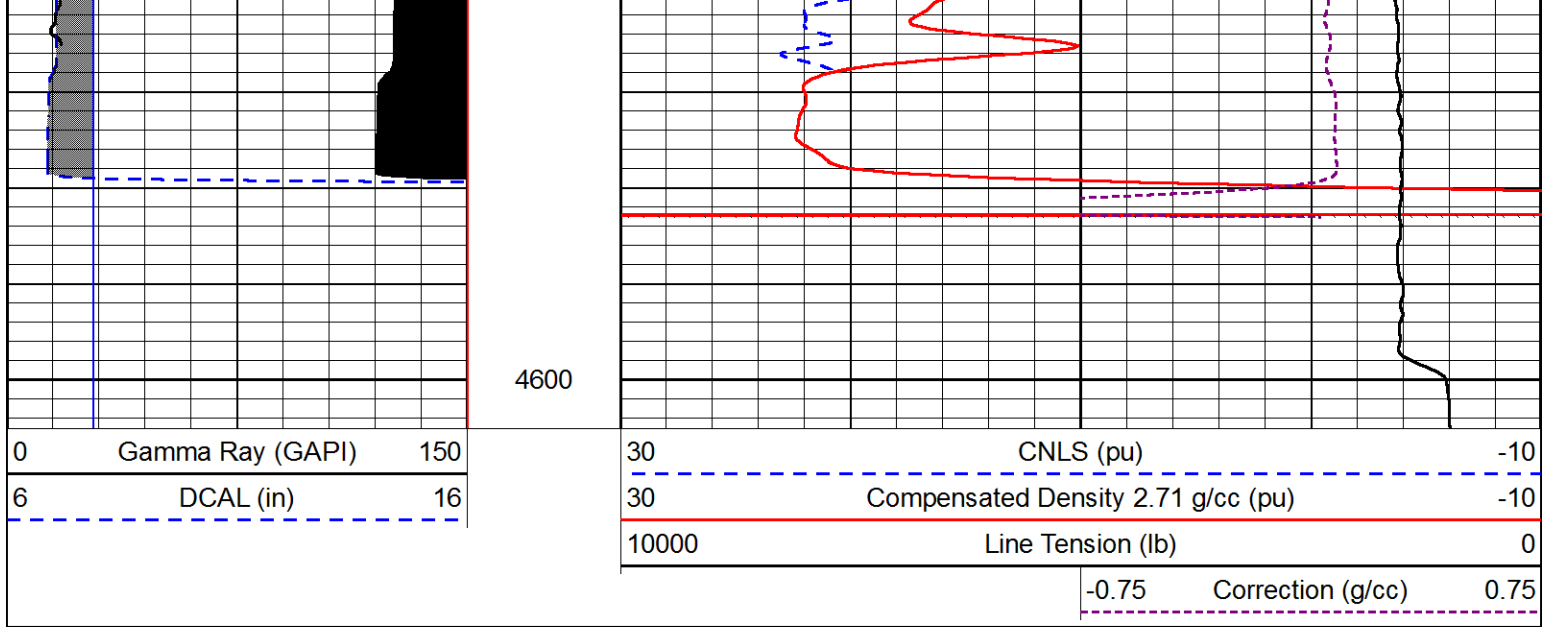
REPEAT SECTION

Database File pickrell drilling_lafon trust_b 1.db
 Dataset Pathname STKML/pass2.1
 Presentation Format cndlspec
 Dataset Creation Sat May 06 18:59:58 2017
 Charted by Depth in Feet scaled 1:240

0	Gamma Ray (GAPI)	150
6	DCAL (in)	16

30	CNLS (pu)	-10
30	Compensated Density 2.71 g/cc (pu)	-10
10000	Line Tension (lb)	0
-0.75	Correction (g/cc)	0.75





Calibration Report

Database File pickrell drilling_lafon trust_b 1.db
 Dataset Pathname STKML/pass3.1
 Dataset Creation Sat May 06 18:55:52 2017

Dual Induction Calibration Report

Serial-Model: PSI 91-M&W
 Calibration Performed: Sat May 06 17:53:33 2017

Loop:	Readings		References			Results	
	Air	Loop	Air	Loop		Gain	Offset
Deep	166.796	835.089	0.000	255.800	mmho/m	0.410	-30.000
Medium	142.009	1348.560	0.000	255.800	mmho/m	0.360	-31.000

Microlog Calibration Report

Serial-Model: PSI-01-PSIML
 Performed: Sat May 06 17:53:42 2017

	Readings		References			Results	
	Zero	Cal	Zero	Cal		m	b
Normal	0.0000	1.0000	0.0000	1.0000	Ohm-m	21500.0000	-1.1000
Inverse	0.0000	1.0000	0.0000	1.0000	Ohm-m	20000.0000	-0.3000
Caliper	1.0001	1.1397	6.5000	18.5000	in	100.0000	-97.3750

Compensated Density Calibration Report

Serial-Model: 90-1031-M&W
 Source / Verifier: 16955B / 2ci
 Master Calibration Performed: Sat May 06 17:53:49 2017

Master Calibration

	Density		Far Detector	Near Detector	
Magnesium	1.755 g/cc		5174.18	6425.27	cps

Aluminum 2.665 g/cc 963.17 4037.42 cps

Spine Angle = 74.55

Density/Spine Ratio = 0.522

	Size		Reading
Small Ring	8.00	in	1.84
Large Ring	22.00	in	1.46

Compensated Neutron Calibration Report

Serial Number: 207-MW
 Tool Model: M&W
 Calibration Performed: Sat May 6 10:30:30 2017

Detector	Readings	Target	Normalization
Short Space	6240.00 cps	1000.00 cps	1.6025
Long Space	460.00 cps	1000.00 cps	1.9500

Gamma Ray Calibration Report

Serial Number: 89
 Tool Model: M&W
 Calibration Performed: Sat May 06 17:54:04 2017

Calibrator Value: 1.0 GAPI

Background Reading: 0.0 cps
 Calibrator Reading: 1.0 cps

Sensitivity: 0.6000 GAPI/cps



PIONEER
 Pioneer Energy Services

Company PICKRELL DRILLING COMPANY, INC.
 Well LAFON TRUST B #1
 Field RANSOM NW
 County NESS
 State KANSAS

June 21, 2017

David Pauly
Pickrell Drilling Company, Inc.
100 S MAIN STE 505
WICHITA, KS 67202-3738

Re: Plugging Application
API 15-135-25949-00-00
LAFON TRUST B 1
NE/4 Sec.17-16S-24W
Ness County, Kansas

Dear David Pauly:

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

Under K.A.R. 82-3-113(b)(2), you must notify DISTRICT 1 of your proposed plugging plan at least 5 days before plugging the well. DISTRICT 1's phone number is (620) 682-7933. Failure to notify DISTRICT 1, 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 December 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 December 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 1