

Kansas Corporation Commission Oil & Gas Conservation Division

1359639

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 #:		API No.	15			
Name:		If pre 19	67, supply original com	pletion date:		
Address 1:		Spot Des	scription:			
Address 2:			Sec T	wp S. R	East W	est
City: State:			Feet from	North /	South Line of Section	ion
			Feet from	East /	West Line of Secti	ion
Contact Person:		Footage	s Calculated from Near	est Outside Sectio	n Corner:	
Phone: ()			NE NW	SE SW		
		1				_
		Lease N	ame:	Well #	:	_
Check One: Oil Well Gas Well OG	D&A	Cathodic Water	er Supply Well	Other:		_
SWD Permit #:	ENHR Permit #	:	Gas Storage	Permit #:		
Conductor Casing Size:	_ Set at:		Cemented with:		Sac	cks
Surface Casing Size:	_ Set at:		Cemented with:		Sac	cks
Production Casing Size:	_ Set at:		Cemented with:		Sac	cks
List (ALL) Perforations and Bridge Plug Sets:						
Elevation: $(\Box G.L. / \Box K.B.)$ T.D.: Condition of Well: Good Poor Junk in Hole Proposed Method of Plugging (attach a separate page if additional angles).	Casing Leak at:			(Stone Corral Formatio	n)	
Is Well Log attached to this application? Yes No If ACO-1 not filed, explain why:	Is ACO-1 filed?	Yes No				
Plugging of this Well will be done in accordance with K. Company Representative authorized to supervise plugging of	•	•		-	ssion	
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



KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1359639

Form KSONA-1
January 2014
Form Must Be Typed
Form must be Signed
All blanks must be Filled

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 #	Well Location:
Phone: () Fax: () Email Address:	
Surface Owner Information: Name:	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.
the KCC with a plat showing the predicted locations of lease roads, tank	edic Protection Borehole Intent), you must supply the surface owners and k batteries, pipelines, and electrical lines. The locations shown on the plat in the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.
owner(s) of the land upon which the subject well is or will be l	Act (House Bill 2032), I have provided the following to the surface ocated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address.
KCC will be required to send this information to the surface ov	acknowledge that, because I have not provided this information, the vner(s). To mitigate the additional cost of the KCC performing this is of the surface owner by filling out the top section of this form and KCC, which is enclosed with this form.
If choosing the second option, submit payment of the \$30.00 handling form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-	fee with this form. If the fee is not received with this form, the KSONA-1 will be returned.
Submitted Electronically	

Form	CP1 - Well Plugging Application	
Operator	Gillman, John	
Well Name	SANBORN 16	
Doc ID	1359639	

Perforations And Bridge Plug Sets

Perforation Top	Perforation Base	Formation	Bridge Plug Depth
470	480	Wayside	

Conservation Division 266 N. Main St., Ste. 220 Wichita, KS 67202-1513



Phone: 316-337-6200 Fax: 316-337-6211 http://kcc.ks.gov/

Sam Brownback, Governor

Pat Apple, Chairman Shari Feist Albrecht, Commissioner Jay Scott Emler, Commissioner

July 11, 2017

John Gillman Gillman, John 3193 CR 2200 INDEPENDENCE, KS 67301

Re: Plugging Application API 15-125-29568-00-00 SANBORN 16 NE/4 Sec.21-34S-15E Montgomery County, Kansas

Dear John Gillman:

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 January 11, 2018. 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 January 11, 2018 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