



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	Vincent Oil Corporation
Well Name	AHRENS 1
Doc ID	1362997

Perforations And Bridge Plug Sets

Perforation Top	Perforation Base	Formation	Bridge Plug Depth
4860	4870	Mississippian	

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SIDE ONE

STATE CORPORATION COMMISSION OF KANSAS OIL & GAS CONSERVATION DIVISION

WELL COMPLETION OR RECOMPLETION FORM ACO-1 WELL HISTORY

DESCRIPTION OF WELL AND LEASE

Operator: License # 5004
 Name Vincent Oil Corporation
 Address 125 North Market - Suite 1110
 City/State/Zip Wichita, Kansas 67202

Purchaser K P & L
 Inland Crude

Operator Contact Person June K. Burnett
 Phone 316-262-3573

Contractor: License # 5149
 Name Wheatstate Oilfield Services, Inc.

Wellsite Geologist John Hastings
 Phone 316-262-3573

Designate Type of Completion

- New Well Re-Entry Workover
- Oil SWD Temp Abd
 Gas Inj Delayed Comp.
 Dry Other (Core, Water Supply etc.)

If ONWCO: old well info as follows:

Operator

Well Name

Comp. Date Old Total Depth

WELL HISTORY

Drilling Method:
 Mud Rotary Air Rotary Cable

....12-7-85 12-17-85 1-27-86
 Spud Date Date Reached TD Completion Date

...4080.....
 Total Depth PBDT

Amount of Surface Pipe Set and Cemented at 477 feet
 Multiple Stage Cementing Collar Used? Yes No
 If yes, show depth set.....feet
 If alternate 2 completion, cement circulated
 from.....feet depth to.....w/.....SX cmt

API NO. 15-097-21,199
 County Kiowa
 C NE SW 26 Twp 28 Rge 18 East West

1980 Ft North from Southeast Corner of Section
 3300 Ft West from Southeast Corner of Section
 (Note: Locate well in section plat below)

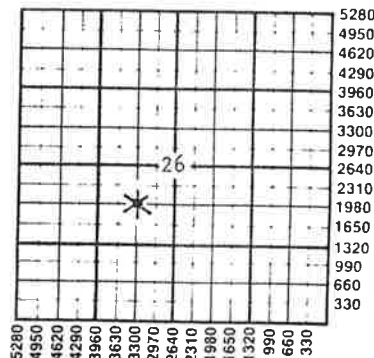
Lease Name Ahrens Well # 1

Field Name Hardy

Producing Formation Mississippian

Elevation: Ground 2240 KB 2252

Section Plat



WATER SUPPLY INFORMATION

Disposition of Produced Water: Disposal Reinjecting
 Docket #

Questions on this portion of the ACO-1 call:
 Water Resources Board (913) 296-3717

Source of Water:
 Division of Water Resources Permit # T 85-1045

Groundwater 1980 Ft North from Southeast Corner
 (Well) 3300 Ft West from Southeast Corner of
 Sec 26 Twp 28 Rge 18 East West

Surface Water.....Ft North from Southeast Corner
 (Stream, pond etc).....Ft West from Southeast Corner
 Sec Twp Rge East West

Other (explain).....
 (purchased from city, R.W.D. #)

INSTRUCTIONS: This form shall be completed in duplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 90 days after completion or recompletion of any well. Rule 82-3-130 and 82-3-107 apply.

Information on side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form. See rule 82-3-107 for confidentiality in excess of 12 months.

One copy of all wireline logs and drillers time log shall be attached with this form. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Signature Richard A. Hiebsch
 Title Vice-President Date 1-31-86

Subscribed and sworn to before me this 31st day of January, 1986
 Notary Public June K. Burnett
 Date Commission Expires March 30, 1989

K.C.C. OFFICE USE ONLY

F Letter of Confidentiality Attached
 C Wireline Log Received
 C Drillers Timelog Received

Distribution

KCC SWD/Rep NGPA
 KGS Plug Other
 (Specify)

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SIDE TWO

Operator Name Vincent Oil Corporation Lease Name Ahrens Well # J

Sec. 26 Twp. 28 Rge. J8 East West County Kiowa

WELL LOG

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface during test. Attach extra sheet if more space is needed. Attach copy of log.

Drill Stem Tests Taken Yes No
 Samples Sent to Geological Survey Yes No
 Cores Taken Yes No

Formation Description
 Log Sample

Name	Top	Bottom
Anhydrite	1174	(+1078)
Base Anhydrite	1190	(+1062)
Stotler	3476	(-1224)
Emporia	3560	(-1308)
Topeka	3884	(-1632)
Heebner	4108	(-1856)
Brown Lime	4269	(-2017)
Lansing-Kansas City	4283	(-2031)
Stark Shale	4572	(-2320)
Base Kansas City	4676	(-2424)
Marmaton	4736	(-2484)
Cherokee Shale	4808	(-2556)
Mississippian	4866	(-2614)
Kinderhook Shale	4936	(-2684)
Kinderhook Sand	4940	(-2688)
LTD	4980	

CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (in O.D.)	Weight Lbs/Ft.	Setting Depth	Type of Cement	#Sacks Used	Type and Percent Additives
surface	12 1/4	8.5/8	23	477	Lite Common	150	3% cc
production	7.7/8	5.1/2	14	4970	REC	150	3% cc, 2% gel

PERFORATION RECORD		Acid, Fracture, Shot, Cement Squeeze Record	
Shots Per Foot	Specify Footage of Each Interval Perforated	(Amount and Kind of Material Used)	Depth
4	4862' - 4888'	Squeezed w/50 sx cement	
4	4862' - 4870'	Acid w/250 gls. 15% MCA	
		Acid w/1000 gls. 15% MCA	
		Fraced w/20,000# sand	

TUBING RECORD			
Size	Set At	Packer at	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2-3/8"	4832'	N/A	

Date of First Production	Producing Method <input checked="" type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (explain).....				
	Oil	Gas	Water	Gas-Oil Ratio	Gravity
Estimated Production Per 24 Hours	30 Bbls	1,500 MCF	40 Bbls	CFPB	

METHOD OF COMPLETION

Production Interval

Disposition of gas: Vented Sold Used on Lease Open Hole Other (Specify) 4862' - 4870'
 Perforation Dually Completed Conmingled

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ACO-1 WELL HISTORY

PAGE 2 (Side One)
 OPERATOR Vincent Oil Corp. LEASE NAME SCHMIDT "C"
 WELL NO. 2

SEC: 26 TWP 28S RGE 18 (W)

FILL IN WELL INFORMATION AS REQUIRED.
 Show all important zones of porosity and contents thereof;
 cored intervals, and all drill-stem tests, including depth
 interval tested, cushion used, time tool open, flowing &
 Shut-in pressures, and recoveries.

Show Geological markers,
 logs run, or Other
 Descriptive information.

FORMATION DESCRIPTION, CONTENTS, ETC.	TOP	BOTTOM	NAME	DEPTH
DST #1: 4272' - 4298'; 30-45-30-45; (Lansing-KC "A" zone)	1st open	- weak blow	increasing to 2 inches	
	2nd open	- weak blow	throughout	
	Recovered:	130'	very slightly gas cut mud w/trace	
	IFP 42 - 53#	ISIP	1326#	
	FFP 74 - 85#	FSIP	1294#	
	BHT - 113	degrees		
DST #2: 4715' - 4811'; 45-60-30-60; (Marmaton-Pawnee)	1st open	- gas to surface	in 4 min.	
	1st open gauged:		3,274 MCF/10 min. 1-1/2" choke	
			2,675 MCF/20 min. "	
			2,916 MCF/30 min. "	
			Stabilized at 2,916 MCF	
	2nd open gauged:		2,789 MCF/10 min. 1-1/2" choke	
			2,916 MCF/20 min. "	
			2,916 MCF/30 min. "	
	Recovered:	40' gas	cut distillate cut mud	
		(85%	mud, 10% distillate, 5% gas)	
	IFP 583 - 562#	ISIP	1640#	
	FFP 583 - 562#	FSIP	1640#	
	BHT - 122	degrees		
DST #3: 4809' - 4884'; 45-60-30-60; (Mississippian)	1st open	- gas to surface	in 3 min.	
	1st open gauged:		980 MCF/10 min. 1-1/4" choke	
			980 MCF/20 min. "	
			& stabilized	
	2nd open gauged:		980 MCF/10 min. "	
			& stabilized	
	Recovered:	250' gas	cut mud	
	IFP 265 - 255#	ISIP	1305#	
	FFP 255 - 255#	FSIP	1299#	
	BHT - 124	degrees		
DST #4: 4885' - 4904'; (Mississippian)	DST pulled	very tight,	lost packer in hole	
	(n) Hit bridge	@4750',	slid tool. 30-45-45-60'	
	1st open	- weak blow	building to 2 inch blow	
	2nd open	- 2 inch blow	throughout	
	Recovered:	90' mud	w/show oil	
	IFP 31 - 31#	ISIP	212#	
	FFP 42 - 42#	FSIP	234#	
	BHT - 124	degrees		

August 11, 2017

M.L. Korphage
Vincent Oil Corporation
200 W DOUGLAS AVE #725
WICHITA, KS 67202-3013

Re: Plugging Application
API 15-097-21199-00-00
AHRENS 1
SW/4 Sec.26-28S-18W
Kiowa County, Kansas

Dear M.L. Korphage:

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 February 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 February 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 1