KOLAR Document ID: 1385930

## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

#### WELL PLUGGING APPLICATION

Form CP-1
March 2010
This Form must be Typed
Form must be Signed
All blanks must be Filled

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 1967     | , supply original comp | oletion date:          |                       |
| Address 1:   |                    | Spot Descr      | ription:               |                        |                       |
| Address 2:   |                    |                 | Sec T\                 | vр S. R                | East West             |
| City: State:   |                    |                 | Feet from              | North /                | South Line of Section |
| Contact Person:  |                    |                 | Feet from              | East /                 | West Line of Section  |
| Phone: ( )   |                    | Footages C      | Calculated from Neare  |                        | n Corner:             |
| Pnone: ( )   |                    | _ [             | NE NW                  | SE SW                  |                       |
|  |                    |                 |                        |                        |                       |
|  |                    | Lease Narr      | ne:                    | vveii #:               |                       |
| Check One: Oil Well Gas Well OC  | G D&A Ca           | athodic Water S | Supply Well            | Other:                 |                       |
| SWD Permit #:  | _ ENHR Permit #: _ |                 |                        | Permit #:              |                       |
| Conductor Casing Size:   | Set at:            | c               | emented with:          |                        | Sacks                 |
| Surface Casing Size:   |                    |                 | emented with:          |                        |                       |
| Production Casing Size:  | Set at:            | C               | emented with:          |                        | Sacks                 |
| List (ALL) Perforations and Bridge Plug Sets:  |                    |                 |                        |                        |                       |
| Condition of Well: Good Poor Junk in Hole Proposed Method of Plugging (attach a separate page if add |                    | (Interval)      | (                      | Stone Corral Formation | n)                    |
| Is Well Log attached to this application? Yes N If ACO-1 not filed, explain why:                     | lo Is ACO-1 filed? | Yes No          |                        |                        |                       |
| Plugging of this Well will be done in accordance with P  | •                  |                 |                        |                        | 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

**Submitted Electronically** 

KOLAR Document ID: 1385930

#### Kansas Corporation Commission Oil & Gas Conservation Division

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 (C  | Cathodic Protection Borehole Intent) T-1 (Transfer) CP-1 (Plugging Application)  |  |  |
|--|--|--|--|
| OPERATOR: License #  | Well Location:   |  |  |
| Name:  | SecTwpS. R   |  |  |
| Address 1:   | County:  |  |  |
| Address 2:   | Lease Name: Well #:  |  |  |
| City: State: Zip:+   | If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:  |  |  |
| Contact Person:  |  |  |  |
| Phone: ( ) Fax: ( )  |  |  |  |
| Email Address:   |  |  |  |
| Surface Owner Information:   |  |  |  |
| Name:  | When filing a Form T-1 involving multiple surface owners, attach an addition   |  |  |
| Address 1:   | 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  |  |  |
| Address 2:   | county, and in the real estate property tax records of the county treasurer.   |  |  |
| City: State: Zip:+   |  |  |  |
| the KCC with a plat showing the predicted locations of lease roads, tank   | dic Protection Borehole Intent), you must supply the surface owners and abatteries, 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.  |  |  |
| Select one of the following:   |  |  |  |
| owner(s) of the land upon which the subject well is or will be loced CP-1 that I am filing in connection with this form; 2) if the form be form; and 3) my operator name, address, phone number, fax, and I have not provided this information to the surface owner(s). I address. | ct (House Bill 2032), I have provided the following to the surface potential: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form peing filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address.  cknowledge that, because I have not provided this information, the process.  To mitigate the additional cost of the KCC performing this |  |  |
| task, I acknowledge that I must provide the name and address that I am being charged a \$30.00 handling fee, payable to the K  | of the surface owner by filling out the top section of this form and CCC, 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-1  | 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  | Coral Production Corporation    |
| Well Name | STEPP 1                         |
| Doc ID    | 1385930                         |

### Perforations And Bridge Plug Sets

| Perforation Top | Perforation Base | Formation | Bridge Plug Depth |
|-----------------|------------------|-----------|-------------------|
| 3403            | 3406             | TORONTO   |                   |
| 3445            | 3503             | LANSING   |                   |

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



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

Governor Jeff Colyer, M.D.

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

February 05, 2018

JIM WIEGER
Coral Production Corporation
1600 STOUT ST STE 1500
DENVER, CO 80202-3133

Re: Plugging Application API 15-163-23512-00-00 STEPP 1 NW/4 Sec.06-10S-18W Rooks County, Kansas

Dear JIM WIEGER:

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 August 05, 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 August 05, 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 4