

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

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

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 (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

Form	CP1 - Well Plugging Application
Operator	Colt Energy Inc
Well Name	HORTON 1-27
Doc ID	1400654

Perforations And Bridge Plug Sets

Perforation Top	Perforation Base	Formation	Bridge Plug Depth
548	882	"CHEROKEE" COALS	

Well Refined Drilling Company, Inc.  
 4230 Douglas Road Thayer, Kansas 66776  
 Contractor License # 33072 - FEIN # 48-1248553  
 620-839-5581/Office; 620-432-6170/Jeff; 620-839-5582/FAX

Rig #:	5	Lic # 5150			S27	T33S	R17E	
API #:	15-125-31702-0000				Location:	SW,NW,NE,NE		
Operator:	Colt Energy Inc.				County:	Montgomery		
Address:	P.O Box 388 Iola, Ks 66749				Gas Tests			
Well #:	1-27	Lease Name:	Horton	Depth	Oz.	Orifice	flow - MCF	
Location:	400	FNL	Line	see page 3				
	1260	FEL	Line					
Spud Date:	12/8/2008							
Date Completed:	12/9/2008	TD:	1005					
Driller:	Josiah Kephart							
Casing Record	Surface	Production						
Hole Size	12 1/4"	7 7/8"						
Casing Size	8 5/8"							
Weight								
Setting Depth	97' 11"							
Cement Type	Portland							
Sacks	Service Company							
Feet of Casing								
08LL-120908-R5-023-Horton 1-27-Colt Energy Inc.								
Well Log								
Top	Bottom	Formation	Top	Bottom	Formation	Top	Bottom	Formation
0	1	overburden	286	360	shale	501	502	coal
1	5	clay	360	396	1st Oswego lime	502	545	shale
5	11	blk shale	365		odor	545	547	blk shale
		wet	396	398.5	Squirrel blk shale	547	548	coal
11	42	lime	398.5	400	shale	548	568	shale
42	61	shale	400	425	2nd Oswego lime	568	569	coal
61	135	lime	425	426	sand	569	573	slime
128		odor	426	428.5	blk shale	573	613	shale
135	150	shale	428.5	430	Mulky coal	613	615	blk shale
150	152	blk shale	430	431	shale	615	616	coal
152	260	shale	431	436	lime	616	648	shale
260	262	lime	436	453	shale	648	650	blk shale
262	263	Mulberry carb shale	453	455	coal	650	661	shale
		undeveloped	455	495	shale	661	662	coal
263	283	Pink lime	495	496.5	lime	662	669	shale
270		odor	496.5	498	shale	669	674	sandy shale
283	285	Anna blk shale	498	500	blk shale	674	684	shale
285	286	Lexington coal	500	501	shale	684	685	coal





Prod. Csg



**CONSOLIDATED**  
Oil Well Services, LLC



**ENTERED**

TICKET NUMBER 20682  
LOCATION Eureka  
FOREMAN Troy Strickler

PO Box 884, Chanute, KS 66720  
620-431-9210 or 800-467-8676

**FIELD TICKET & TREATMENT REPORT**  
**CEMENT**

15-125-31702

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
12-10-08		Horton 1-27				RG
CUSTOMER			TRUCK #	DRIVER	TRUCK #	DRIVER
Colt Energy Inc.			520	Cliff		
MAILING ADDRESS			479	John		
P.O. Box 388						
CITY	STATE	ZIP CODE				
Iola	Ks					

JOB TYPE LC HOLE SIZE 7 7/8" HOLE DEPTH 1000' CASING SIZE & WEIGHT 5 1/2" 14"  
 CASING DEPTH 986' DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT 12.4" SLURRY VOL \_\_\_\_\_ WATER gal/sk 8" CEMENT LEFT in CASING 3' shoe fly  
 DISPLACEMENT 2400l DISPLACEMENT PSI 500 MIX PSI 1000 @ 1 fly RATE \_\_\_\_\_

REMARKS: Safety Meeting: Rig up to 5 1/2" casing. Break Circulation w/ 5000 water.  
Pump 80k Gel-Flush, 5000 water, 2000l Metacillate Pre-Flush, 5000 water, mixed 1300k  
Thickset Cement w/ 8"/Kol-Seal @ 13.4"/gal. Wash out Pump + lines. Release  
Plug. Displace w/ 2400l water. Final Pumping Pressure 500PSI. Pump Plug to 1000 PSI.  
wait 2min. Release Pressure. Float Held. Good Cement to surface = 1000 PSI  
to Pit.  
Job Complete

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	925.00	925.00
5406	40	MILEAGE	3.65	146.00
1126A	1300k	Thickset Cement	17.00	2210.00
1110A	1040"	Kol-Seal 8"/hr	.42	436.80
1112A	500"	Gel-Flush	.17	62.00
1102	80"	Cash	.75	60.00
1111A	100"	Metacillate Pre-Flush	1.80	180.00
5407A	7.15 hr	Ton-Mileage	1.20	843.20
4406	1	5 1/2" Top Rubber Fly	61.00	61.00
		Thank!		
			Sub Total	4430.00
			SALES TAX	109.83
			ESTIMATED TOTAL	4539.83

Revin 3737

AUTHORIZATION called by Glean

221919  
TITLE Co-Rep

DATE \_\_\_\_\_

4589.83



**CONSOLIDATED**  
Oil Field Services, LLC

**ENTERED**

Surface

TICKET NUMBER 20678

LOCATION Eureka

FOREMAN Tray Strickland

PO Box 884, Chanute, KS 66720  
620-431-9210 or 800-467-8876

**FIELD TICKET & TREATMENT REPORT**  
**CEMENT**

15-125-31702

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
12-5-08	1868	Horton 1-27				MO
CUSTOMER Colt Energy Inc.			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS P.O. Box 388			520	Cliff		
CITY Iola			502	Phil		
STATE Ks		ZIP CODE				

JOB TYPE S/P HOLE SIZE 12 1/4" HOLE DEPTH 100' CASING SIZE & WEIGHT 8 5/8"  
 CASING DEPTH 100' DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT 14.84 SLURRY VOL 12.81 WATER gal/sk 6.5 CEMENT LEFT in CASING 15'  
 DISPLACEMENT 5.484 DISPLACEMENT PSI \_\_\_\_\_ MIX PSI \_\_\_\_\_ RATE \_\_\_\_\_

REMARKS: Safety Meeting! Rig up to 8 5/8" casing. Break Granulom w/ water.  
 Mixed 50/100 Class A Cement w/ 2% Gel + 2% Cacl<sub>2</sub> @ 14.84 gal. Displace  
 w/ 5.484 water. shut casing in w/ Good Cement to surface  
 50/100 slurry to pit  
 Job Complete.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE	725.00	725.00
5406	40	MILEAGE <u>2nd of 2 miles</u>	3.65	N/A
11045	50/100	Class A Cement	13.50	675.00
11184	94#	Gel 2%	.17	15.98
1102	94#	Cacl <sub>2</sub> 2%	.75	70.50
5402		Ten-Mileage	m/c	315.00
		Thank u!		
			526 Total	1801.48
			SALES TAX	40.30
			ESTIMATED TOTAL	1841.78

Ravin 3737

AUTHORIZATION Witnessed by John

021884  
TITLE Co-Rep

DATE \_\_\_\_\_



March 08, 2018

REX R. ASHLOCK  
Colt Energy Inc  
PO BOX 388  
IOLA, KS 66749-0388

Re: Plugging Application  
API 15-125-31702-00-00  
HORTON 1-27  
NE/4 Sec.27-33S-17E  
Montgomery County, Kansas

Dear REX R. ASHLOCK:

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) 902-6450. 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 September 08, 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 September 08, 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