KOLAR Document ID: 1421850

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	5				
Name:			If pre 1967, supply original completion date:				
Address 1:		Spot Desc	cription:				
Address 2:			Sec	_ Twp S. R.	East We		
City: State:		_	Feet fr	om North /	South Line of Section		
Contact Person:		_	Feet fr	om East /	West Line of Sectio		
Phone: ()		Footages	Calculated from No	earest Outside Sector			
Thore. ()		Country			vv		
					I #:		
Check One: Oil Well Gas Well OG	D&A Catho	odic Water	Supply Well	Other:			
SWD Permit #:	ENHR Permit #:		Gas Stora	age Permit #:			
Conductor Casing Size:	Set at:		Demented with:		Sack		
Surface Casing Size:	Set at:		Demented with:		Sack		
Production Casing Size:	Set at:	(Cemented with:		Sack		
List (ALL) Perforations and Bridge Plug Sets:							
Condition of Well: Good Poor Junk in Hole Proposed Method of Plugging (attach a separate page if addition	Casing Leak at:onal space is needed):	(Interval)	-	(Stone Corral Forma	ation)		
Is Well Log attached to this application?	Is ACO-1 filed? Ye	s No					
If ACO-1 not filed, explain why:							
Plugging of this Well will be done in accordance with K.S	S.A. 55-101 <u>et. seq</u> . and the R	ules and Regula	tions of the State	Corporation Com	mission		
Company Representative authorized to supervise plugging o	perations:						
Address:	Cit	y:	State:	Zip:	++		
Phone: ()							
Plugging Contractor License #:	Na	nme:					
Address 1:	Add	dress 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: 1421850

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	athodic Protection Borehole Intent) T-1 (Transfer) CP-1 (Plugging Application)			
OPERATOR: License #	Well Location:			
Name:	SecTwpS. R			
Address 1:	County: Well #:			
Address 2:	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:			
City: State: Zip:+				
Contact Person:				
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			
Address 1:				
Address 2:	county, and in the real estate property tax records of the county treasurer.			
City:				
the KCC with a plat showing the predicted locations of lease roads, tank are preliminary non-binding estimates. The locations may be entered on Select one of the following: I certify that, pursuant to the Kansas Surface Owner Notice Acowner(s) of the land upon which the subject well is or will be located CP-1 that I am filing in connection with this form; 2) if the form beform; and 3) my operator name, address, phone number, fax, and I have not provided this information to the surface owner(s). I ack KCC will be required to send this information to the surface owner.	cknowledge that, because I have not provided this information, the ner(s). To mitigate the additional cost of the KCC performing this			
that I am being charged a \$30.00 handling fee, payable to the Ko	fee with this form. If the fee is not received with this form, the KSONA-1			
Submitted Electronically				