

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	Vincent Oil Corporation
Well Name	PETERS 1-24
Doc ID	1425401

Perforations And Bridge Plug Sets

Perforation Top	Perforation Base	Formation	Bridge Plug Depth
4800	4806	Pawnee	4970
4991	5000	Mississippian	
5004	5009	Mississippian	
5016	5018	Mississippian	

QUALITY WELL SERVICE, INC.

5791

Federal Tax I.D. # 481187368

Home Office 324 Simpson St., Pratt, KS 67124

Heath's Cell 620-727-3410
Office / Fax 620-672-3663

Rich's Cell 620-727-3409
Brady's Cell 620-727-6964

Date	12-22-12	Sec.	24	Twsp.	27	Range	24	County	Ford	State	Ks	On Location		Finish	10:30am	
Lease	Peters		Well No.	1-24		Location	Ford + Saddle rd. 8W 2 1/2 N									
Contractor	Val 5				Owner	E into										
Type Job	Surface				To Quality Well Service, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.											
Hole Size	12 1/4		T.D.	570												
Csg.	8 5/8		Depth	561.50												
Tbg. Size			Depth													
Tool			Depth													
Cement Left in Csg.			Shoe Joint													
Meas Line			Displace	33.08		Cement Amount Ordered	300ss Common									
EQUIPMENT				2% Gel 3% CC 1/4 C.F												
Pumptrk	8	No.	Cody		Common	300										
Bulktrk	7	No.	Mike		Poz. Mix											
Bulktrk		No.	David		Gel.	6										
Pickup		No.			Calcium	11										
JOB SERVICES & REMARKS				Hulls												
Rat Hole			Salt													
Mouse Hole			Flowseal 75													
Centralizers			Kol-Seal													
Baskets			Mud CLR 48													
D/V or Port Collar			CFL-117 or CD110 CAF 38													
			Sand													
			Handling 317													
			Mileage 50													
	Ran 13jts 8 5/8 csg				FLOAT EQUIPMENT											
	Established circulation with Mud Pump.				Guide Shoe											
					Centralizer											
	Mixed and pumped 300ss Common				Baskets											
	2% Gel 3% CC 1/4 C.F.				AFU Inserts											
	Displaced with 33.08 bbls H ₂ O				Float Shoe											
					Latch Down											
	Cement did circulate to surface.				8 5/8 Baffle Plate											
					8 5/8 wooden Plug											
					Pumptrk Charge Surface											
					Mileage 50											
					Tax											
					Discount											
					Total Charge											
X Signature	Brendy Smith															

ALLIED CEMENTING CO., LLC. 038114

Federal Tax I.D.# 20-5975804

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:
Medicine Lodge

DATE <i>1-8-13</i>	SEC. <i>24</i>	TWP. <i>27S</i>	RANGE <i>24W</i>	CALLED OUT <i>11:00 AM</i>	ON LOCATION <i>1:00 PM</i>	JOB START <i>5:30</i>	JOB FINISH <i>6:45</i>
LEASE <i>Peters</i>	WELL # <i>1-24</i>	LOCATION <i>Ford Co, N to Saddle Rd,</i>			COUNTY <i>Ford</i>	STATE <i>Ks</i>	
OLD OR NEW (Circle one) <input checked="" type="radio"/> OLD		LOCATION <i>W to Rd 117, 3 N, E into</i>			<i>1.02</i>	<i>7.95</i>	

CONTRACTOR *Val #5*

TYPE OF JOB *Production*

HOLE SIZE *7 7/8* T.D. *5200*

CASING SIZE *4 1/2* DEPTH *5200*

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX *1300* MINIMUM

MEAS. LINE SHOE JOINT *41*

CEMENT LEFT IN CSG. *41*

PERFS.

DISPLACEMENT *81 Bbls*

OWNER *Vincent Oil*

CEMENT

AMOUNT ORDERED *50 sy 601.40: 4% gel*

1753x "A" ASC. 1.5% Kalscal 1.5%

FI-160

COMMON <i>Class "A"</i>	<i>30 @</i>	<i>17.90</i>	<i>537.00</i>
POZMIX	<i>20 @</i>	<i>9.35</i>	<i>187.00</i>
GEL	<i>2 @</i>	<i>23.40</i>	<i>46.80</i>
CHLORIDE	<i>@</i>		
ASC	<i>175 @</i>	<i>20.90</i>	<i>3657.50</i>
<i>ASF</i>	<i>12 @</i>	<i>58.70</i>	<i>704.40</i>
<i>Clayco</i>	<i>8 @</i>	<i>27.40</i>	<i>219.20</i>
<i>Kalscal</i>	<i>875 @</i>	<i>.90</i>	<i>787.50</i>
<i>FI-160</i>	<i>82 @</i>	<i>18.90</i>	<i>1549.80</i>

EQUIPMENT

PUMP TRUCK CEMENTER *Ron Gilley*

471-302 HELPER *David Felia*

BULK TRUCK

421-252 DRIVER *Justin Bowen*

BULK TRUCK

DRIVER

HANDLING *272.94 @ 2.48 689.79*

MILEAGE *12.05 x 50 x 2.60 156.30*

TOTAL *10068.59*

REMARKS:

See Cement Log

SERVICE

DEPTH OF JOB *5200'*

PUMP TRUCK CHARGE *3,099.25*

EXTRA FOOTAGE *@*

MILEAGE *50 @ 7.70 385.00*

MANIFOLD *Head @ 275.00*

Light Veh: 50 @ 4.40 220.00

CHARGE TO: *Vincent Oil*

STREET _____

CITY _____ STATE _____ ZIP _____

TOTAL *3979.25*

4 1/2 PLUG & FLOAT EQUIPMENT

<i>1- Rubber Plug</i>	<i>@</i>	<i>83.07</i>
<i>1- Guide Shoe</i>	<i>@</i>	<i>224.64</i>
<i>1- AFU Insect</i>	<i>@</i>	<i>291.33</i>
<i>1- Basket</i>	<i>@</i>	<i>35.90</i>
<i>1- Part Callav</i>	<i>@</i>	<i>290.75</i>
<i>6- Centralizers</i>	<i>@</i>	<i>56.96</i>
TOTAL		<i>4159.35</i>

To: Allied Cementing Co., LLC.
You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

SALES TAX (If Any) *951.93*

TOTAL CHARGES *418206.99*

DISCOUNT *20% 3641.40* IF PAID IN 30 DAYS

PRINTED NAME *X ERIC HAGANS*

SIGNATURE *X Eric Hagans*

Net *\$14565.59*

ALLIED CEMENTING CO., LLC. 32719

Federal Tax I.D.# 20-5975804

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:
Medicine Lodge, KS

DATE <i>01-21-13</i>	SEC <i>24</i>	TWP <i>27s</i>	RANGE <i>24w</i>	CALLED OUT	ON LOCATION	JOB START	JOB FINISH
LEASE <i>Peters</i>	WELL # <i>1-24</i>	LOCATION <i>Fond KS, 1/4 N, West to 117, 3 N, E/S</i>			COUNTY <i>Fond</i>	STATE <i>KS</i>	
OLD OR NEW (Circle one)						<i>1.04</i> <i>1.95</i>	

CONTRACTOR <i>H-D</i>	OWNER <i>Vincent</i>
TYPE OF JOB <i>Pont Callan</i>	
HOLE SIZE _____ T.D. _____	CEMENT
CASING SIZE <i>4 1/2</i>	AMOUNT ORDERED <i>450sx 65:35:6% gel + 1/4 #</i>
TUBING SIZE <i>2 3/4</i>	<i>Flo Seal (used 300sx)</i>
DRILL PIPE _____ DEPTH _____	
TOOL <i>Pont Callan</i> DEPTH <i>1584'</i>	
PRES. MAX _____ MINIMUM _____	COMMON _____ @ <i>1'</i>
MEAS. LINE _____ SHOE JOINT <i>NA</i>	POZMIX _____ @ _____
CEMENT LBFT IN CSG. _____	GEL _____ @ _____
PERFS. _____	CHLORIDE _____ @ _____

DISPLACEMENT <i>5 1/2 Fresh H²O</i>	ASC _____ @ _____
EQUIPMENT	<i>1 1/2 weight 300sx @ 16.50 = 4950.00</i>
PUMP TRUCK CEMENTER <i>D. Fitch / Patrick (GB)</i>	<i>Flo Seal 15# @ 2.97 = 222.15</i>
# <i>548-545</i> HELPER <i>S. Heard</i>	
BULK TRUCK	
# <i>421-252</i> DRIVER <i>J. Bowen</i>	
BULK TRUCK	
# _____ DRIVER	

REMARKS:
See Job log
Mixed 300sx 65:35 cement, Did Circulate
Reversed Clean
THX ☺

HANDLING <i>331.1 ft³</i>	@ <i>2.41</i>	<i>821.13</i>
MILEAGE <i>50 miles @ 13.87 + tax 2.60</i>		<i>1803.10</i>
<i>693.50</i>		TOTAL <i>7796.98</i>

CHARGE TO: *Vincent*

STREET _____

CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB <i>1584</i>		
PUMP TRUCK CHARGE		<i>2249.84</i>
EXTRA FOOTAGE _____ @ _____		
MILEAGE <i>50</i> @ <i>7.70</i>		<i>385.00</i>
MANIFOLD <i>Squeeze</i> @ _____		<i>300.00</i>
<i>Light + Vehicle 50</i> @ <i>4.40</i>		<i>220.00</i>
TOTAL		<i>3154.84</i>

PLUG & FLOAT EQUIPMENT

<i>None</i>	@ _____	
	@ _____	
	@ _____	
	@ _____	
	@ _____	
TOTAL		

To Allied Cementing Co., LLC.
You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

SALES TAX (If Any) <i>411.23</i>	
TOTAL CHARGES <i>10 951.82</i>	
DISCOUNT <i>2190.36</i>	IF PAID IN 30 DAYS
<i>Net. 8761.46</i>	

PRINTED NAME *ERIK HAGANS*

SIGNATURE *Erik Hagans*

STATE OF KANSAS

CORPORATION COMMISSION
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 | DWIGHT D. KEEN, COMMISSIONER

October 22, 2018

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

Re: Plugging Application
API 15-057-20868-00-00
PETERS 1-24
NW/4 Sec.24-27S-24W
Ford 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 April 22, 2019. 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 April 22, 2019 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