CORRECTION #1

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

KOLAR Document ID: 1428903

March 2010
This Form must be Typed
Form must be Signed

Form CP-1

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 #:		API No. 15			
Name:		If pre 1967, supply o	original compl	etion date:	
Address 1:		Spot Description:	- ·		
Address 2:					
City: State:					
Contact Person:		Footages Calculated	d from Neares	at Outside Sectio	n Corner:
Phone: ()			NW	SE SW	
		County:			
		Lease Name:		Well #	:
Check One: Oil Well Gas Well OG	D&A Cathodic	Water Supply W	ell 🗌 O	ther:	
SWD Permit #:	ENHR Permit #:			Permit #:	
Conductor Casing Size:					
Surface Casing Size:					
Production Casing Size:					
List (ALL) Perforations and Bridge Plug Sets:					
Elevation: (G.L. / K.B.) T.D.: Condition of Well: Good Poor Junk in Hole Proposed Method of Plugging (attach a separate page if addition) Poor Separate page if addition	Casing Leak at:	hydrite Depth:		tone Corral Formatic	on)
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.	S.A. 55-101 <u>et. seq</u> . and the Rule	s and Regulations of t	he State Corp	ooration Commi	ssion
Company Representative authorized to supervise plugging of	perations:				
Address:	City: _		State:	Zip:	
Phone: ()					
Plugging Contractor License #:	Name	:			
Address 1:	Addre	ss 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

CORRECTION #1

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

CERTIFICATION OF COMPLIANCE WITH THE KANSAS SURFACE OWNER NOTIFICATION ACT

Form KSONA-1
January 2014
Form Must Be Typed

KOLAR Document ID: 1428903

Form must be Signed All blanks must be Filled

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 #	Well Location:				
Name:					
Address 1:	County:				
Address 2:	Lease Name: Well #:				
City: Zip: Contact Person:	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:				
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 county, and in the real estate property tax records of the county treasurer.				
Address 1:					
Address 2:					
City: State: Zip:+					

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.

Submitted Electronically

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

December 03, 2018

STEVE MITCHELL Atmos Energy Corporation 1200 11TH AVE GREELEY, CO 80631-3828

Re: Plugging Application API 15-127-20568-00-00 COUNCIL GROVE HP 3 9 NW/4 Sec.18-16S-07E Morris County, Kansas

Dear STEVE MITCHELL:

The Conservation Division has received your Well Plugging Application (CP-1).

Under K.A.R. 82-3-113(b)(2), you must notify DISTRICT 2 of your proposed plugging plan at least 5 days before plugging the well. DISTRICT 2's phone number is (316) 337-7400. Failure to notify DISTRICT 2, 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 June 03, 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 June 03, 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 2

Summary of Changes

Lease Name and Number: COUNCIL GROVE HP 3 9						
API/Permit #: 15-127-20568-00-00						
Doc ID: 1428903						
Correction Number: 1						
Field Name	Previous Value	New Value				
KSONA Contact Email		STEVE.MITCHELL@AT				
		MOSENERGY.COM				
KSONA Contact Person	TJ REED	STEVE MITCHELL				
KSONA Contact Phone	284-3693	570-3000				
Number						
SaveLink	//kcc/detail/operatorE	//kcc/detail/operatorE				
	ditDetail.cfm?docID=14 28197	ditDetail.cfm?docID=14 28903				
	20101	20000				

Summary of Attachments

Lease Name and Number: COUNCIL GROVE HP 3 9 API: 15-127-20568-00-00 Doc ID: 1428903 Correction Number: 1 Attachment Name

Plugging Approval Letter