

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	Citation Oil & Gas Corp.
Well Name	MADDY B-2
Doc ID	1454305

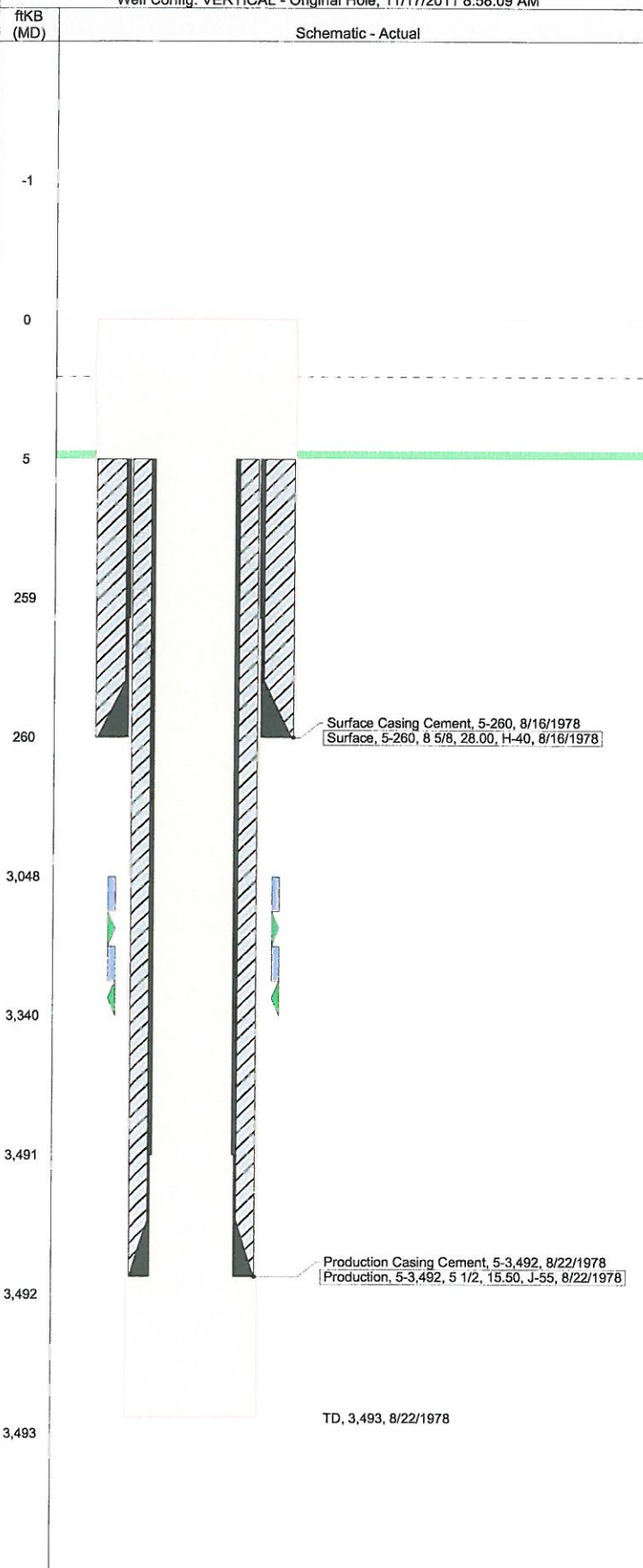
Perforations And Bridge Plug Sets

Perforation Top	Perforation Base	Formation	Bridge Plug Depth
3048	3340	Arbuckle	

# Wellbore Schematic Input Report

Well Name: **MADDY B W-02**

Well Config: VERTICAL - Original Hole, 11/17/2011 8:58:09 AM



## Well Header

API		Business Unit		Spud Date		Well Configuration Type	
15-163-20834		ROCKIES MID-CON		8/16/1978		VERTICAL	
Orig KB Elev (ft)	KB - GL / ...	Quarter Quarter	Sec/Abs	Twn/Su...	Range	P & A Date	
1,985.00	5	SE SE NE	36	8S	18W		
Comment							

Comment

Directions To Well

## Bottom Hole Location

North-South Distance (ft)	From N or S Line	East-West Distance (ft)	From E or W Line
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## PBTDs

Date	Depth (ftKB)	Method	Comment
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## Wellbore Sections

Section	Size (in)	Act Top (ftKB)	Act Btm (ftKB)
SURFACE	12 1/4	0.0	260.0
PRODUCTION	7 7/8	260.0	3,493.0

## Zone Statuses

Zone	Status Date	Status	Job
ARBUCKLE		SI	

## Casing Strings

### Surface, 260.0ftKB

Casing Description	Run Date	String ...	String Wt...	String ...	Top (ftKB)	Set Depth ...
Surface	8/16/1978	8 5/8	28.00	H-40	0.0	260.0

### Production, 3,492.0ftKB

Casing Description	Run Date	String ...	String Wt...	String ...	Top (ftKB)	Set Depth ...
Production	8/22/1978	5 1/2	15.50	J-55	-1.0	3,492.0

## Cement

Description	Top (ftKB)	Bottom (ftKB)
Surface Casing Cement	5.0	260.0
Description	Top (ftKB)	Bottom (ftKB)
Production Casing Cement	5.0	3,492.0

## Tubing Components

Item Description	OD (in)	Wt (lbs/ft)	Grade	Jts	Len (ft)	Btm (ftKB)	Bottom Depth (TVD) (ftKB)
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## Perforation Data

Zone	Bnch/Stg	Entered Shot Total	Top (ftKB)	Btm (ftKB)	Date
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## Stimulations & Treatments

Date	Zone	Primary Job Type
11/1/2010		ACID TREATMENT
Technical Result	Tech Result Details	Tech Result Notes
Comment		

## Other In Hole

Run Date	Description	OD (in)	Top (ftKB)	Btm (ftKB)
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## Logs

Date	Type	Top (ftKB)	Btm (ftKB)
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R-4 packer set @ 3000'

WELL MADDDY B-2 INJ

LEGAL SE-SE-NE S W 36-8-18 ROOKS

AVG DAILY PROD BD BW

DATE DRILLED MO 8 YR 78

CUM PROD BD

CUM PROD BD (LEASE)

BUYER

UTL SUPPL MO

AVG COST MO

CHEM

AVG COST MO

PUMPING UNIT MAN. NONE  
SIZE  
SN

ENGINE MAN. NONE  
SIZE  
SN

TUBING 2 7/8" @ 3000' CEMENT LINED

RODS NONE OF " OF "

PUMP MAN. NONE  
SIZE

GUN BBL RW FG ST BBL

STOCK SIZE NO

SALT WTR SIZE 200# FIBERGLASS

LOGS OH CB GN GRDC NONE

SURF 8 5/8" @ 215'

SQUEEZE @ 125'

PERF MO

HOLE MO

DV MO

ANHY MO

PROD. PERFS

3048 - 3052

3144 - 3148

3178 - 3182

3227 - 3231

3238 - 3242

3245 - 3302

3313 - 3320

3336 - 3340

CEM TOP SURFACE  
CEM 350 SX

PSTD 5 1/2"  
SET 3493  
RTD 3493

COMMENTS

March 20, 2019

Sharon Ward  
Citation Oil & Gas Corp.  
14077 CUTTEN RD  
PO BOX 690688  
HOUSTON, TX 77269-0688

Re: Plugging Application  
API 15-163-20834-00-01  
MADDY B-2  
NE/4 Sec.36-08S-18W  
Rooks County, Kansas

Dear Sharon Ward:

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 September 16, 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 September 16, 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 4