KOLAR Document ID: 1458446

Form CP-1 March 2010

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KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

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 #: _____ 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 _____ State: _____ Zip: _____ + _ Feet from East / West Line of Section Contact Person: ____ Footages Calculated from Nearest Outside Section Corner: ___) _____ NE NW SE SW County: ___ _____ Well #: _____ Lease Name: ____ 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: _____ Set at: ____ Cemented with:

_____ Set at: ____

Cemented with:

List (ALL) Perforations and Bridge Plug Sets:

Surface Casing Size:

Production Casing Size: ____

Name: ____

Address 1: __

Address 2:

Phone: (_____

City: ____

Elevation:	(<i>K.B.)</i> T.D.:	PBTD:	Anhydrite Depth:				
				(-	Stone Corral Formation	on)	
Condition of Well:	Good Poor Junk in Hole	Casing Leak at:	(Interval)				
Proposed Method	of Plugging (attach a separate page if additi	ional space is needed):	(interval)				
Is Well Log attach	ed to this application?	Is ACO-1 filed?	Yes No				
IS WEILLOY ALLACT		IS ACC-1 lileu?					
If ACO-1 not filed,	explain why:						
Plugging of this	Well will be done in accordance with K.	S.A. 55-101 <u>et. seq</u> . ar	nd the Rules and Regulation	s of the State Cor	poration Commi	ssion	
Company Repres	entative authorized to supervise plugging of	operations:					
Address:			City:	State:	Zip:		
Phone: ())						
Plugging Contrac	tor 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

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KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

CERTIFICATION OF COMPLIANCE WITH THE KANSAS SURFACE OWNER NOTIFICATION ACT

	Form KSONA-1
	January 2014
F	orm Must Be Typed
Fo	rm must be Signed
All bla	anks 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: State: Zip:+	If filing a Form T-1 for multiple wells on a lease, enter the legal description of		
Contact Person:	the lease below:		
Phone: () Fax: ()			
Email Address:			
Surface Owner Information:			
Name:	When filing a Form T-1 involving multiple surface owners, attach an additional		
Address 1:	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 2:	county, and in the real estate property tax records of the county treasurer.		
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

Form	CP1 - Well Plugging Application
Operator	Altavista Energy, Inc.
Well Name	ROLF A-1
Doc ID	1458446

Perforations And Bridge Plug Sets

Perforation Top	Perforation Base	Formation	Bridge Plug Depth
1026	1032	Squirrel	