KOLAR Document ID: 1461639

### 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. 1	5					
Name:		If pre 196	If pre 1967, supply original completion date:					
Address 1:		Spot Des	cription:					
Address 2:			Sec Twp S. R East West					
City: State:			Feet from	North /	South Line of Section			
Contact Person:			Feet from	East /	West Line of Section			
Phone: ( )		Footages	Calculated from Neare		n Corner:			
Pnone: ( )		_	NE NW	SE SW				
			ame:					
		Lease No	ame.	vveii #.				
Check One: Oil Well Gas Well OG	D&A C	Cathodic Wate	r 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.:  Condition of Well: Good Poor Junk in Hole  Proposed Method of Plugging (attach a separate page if additi	Casing Leak at:			Stone Corral Formatio	n)			
Is Well Log attached to this application? Yes No If ACO-1 not filed, explain why:	Is ACO-1 filed?	Yes No						
Plugging of this Well will be done in accordance with K.s.  Company Representative authorized to supervise plugging of		_			ssion			
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

KOLAR Document ID: 1461639

### 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 (Ca	athodic Protection Borehole Intent) T-1 (Transfer) CP-1 (Plugging Application)
OPERATOR: License #	Well Location:
Name:	SecTwpS. R East _ West
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 the lease below:
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
Address 1:	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:	
owner(s) of the land upon which the subject well is or will be loc CP-1 that I am filing in connection with this form; 2) if the form be form; and 3) my operator name, address, phone number, fax, an  I have not provided this information to the surface owner(s). I ac KCC will be required to send this information to the surface own	batteries, pipelines, and electrical lines. The locations shown on the plat the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.  et (House Bill 2032), I have provided the following to the surface cated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form eing filed is a Form C-1 or Form CB-1, the plat(s) required by this ad email address.  eknowledge that, because I have not provided this information, the ner(s). To mitigate the additional cost of the KCC performing this of the surface owner by filling out the top section of this form and
If choosing the second option, submit payment of the \$30.00 handling form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1	fee with this form. If the fee is not received with this form, the KSONA-1
Submitted Electronically	

Gerald Owings (C and C Co.)
Gerald Owings Lease
Well# 1

## Finch's Drilling, Inc.

R.R. #2 - OTTAWA, KANSAS 66067 878-3332 - 878-3765 - 878-3596 Core Time

Start Core At 690 !

Casing Record From To Minutes **Formation** n91 9:30 Size Pipe \_\_\_\_\_ No. Feet 6904 Surface Set 79 P 692 693 Seat Nipple Set\_\_\_\_688! Hole Size\_\_\_5\_5/8\*\* 4 694 695 Set Through\_\_\_\_\_Open Hole\_\_XX\_\_\_\_ 3 696 STATEMENT 697 Date <u>July 23. 1981</u> 698 5 699 700 <u>0-0'</u> Drilling At \$5.00 Ft. \$3450.00 /01 20 \* Coring At\$20.00 Ft. 400.00 702 703 5 704 \_\_\_\_\_ Hours At \_\_\_\_ Per Hour \_\_\_\_\_ 6 705 4 706 707 5 708 Total \$3.850 ...00 709 10:57 6 710 Lease Name \_\_\_\_\_ Gerald Owings Well Owner \_\_\_\_\_ C and O Co Well No. State Kansas County Franklin Township Range Section

# Finch's Drilling, Inc. R.R. #2 - OTTAWA, KANSAS 66067 878-3332 - 878-3765 - 878-3596

Drill Log

	256.0		0/0-3332 - 0/0-	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
Thickness	Formation	Total Depth	Remarks	Thickness	Formation	Total Depth	Remarks
26 Top	oil & -lay	26					
68	Line	94					
47	shale	141					
23	Lime	164			2		
71	Shale	23 5					
23	Lime	258					
23	Shale	281	1				
7	Lime	288					<del></del>
3.8	ahale	326					
4	Lime	330	-11:50 - 11:50 - 11:50 - 11:50 - 11:50 - 11:50 - 11:50 - 11:50 - 11:50 - 11:50 - 11:50 - 11:50 - 11:50 - 11:50				
13	ahale	343					
26	Lime	369					
6	Shale	375					
24	Lime	399					
	Shale	403	Hertha				
12	Lime	415	THOSE COM				
40	hale	455					
10	Sand	465	White		-		
10	Sand&shale	480 490	Sandy shale		4.0	-	
101	Shale	591			<del> </del>		
8	Lime	599			-	-	
4	3hale	603					***************************************
9	Line	6i2					
9	Shaie	621					
8	Lime	629					
1.2	Shale	641					
4	Line						
4	Shale	.45 649					
3	Lime	652					
3	عادماد	-655					
10	Line	645					
11	Shale	676					
2	Lime	678					
9	Shale	687					
1	Lime	688					
1	bhale	689					
. 4	Sand&shala	690	Oil *how				
20	Cored	710	011 NOW				

## P.O. Box 884 Chanute, Kan PHONE 316/431-9210

Chanute, Kansas 66720

**Ticket** 

Date	-	Customer's Orde	r No.	Sec.	Twp.	Range	Well No. & F	arm	6.	Place or Destination	Hendlo
7/2	1181	.59	33			Owner			County		
Charge To	/ 7.	ovald	Alexander	400			C	TU#1	/	M	
Mailing Address					Contractor	Contractor State				1/2	
	84	12 1	nain			L				(_)	
City & State	4	sellst	ille;	Ks. C	66092						
			-	CEN	ENTIN	IG SE	RVICE	DATA			
TY	PE OF JOB		CASING	но	LE DATA	PLUGS	AND HEAD	PRE	SSURE		LEFT IN CASING
Surface		New		Bore	(-5)	Bottom		Circulating	200	Requested	
Production	- W	Used	- V	Size	3 18	Тор	-	Minimum	200	Necessity Measured	t
Squeeze	112.20	Size	13%	Total Depth	7/0	Head		Maximum	200	Measured	
Pumping		Weight	12	Cable Tool		FLOAT	EQUIPMENT	Sacks Cement	76	5 X 400	× 4
Other		Depth	169					Type & Brand	10	KILMAN	5 17
		Туре		Rotary	V			Admixes		KENIE	
			EDAI	TUDI	NG -	ACIDI7	ING SI	RVICE	DATA		
			FNA	IUNI	MG - 1	TOIDIZ	.III OI	LITTOL	DIVITA		
Type of Job					A	t Intervals of					
Bbls Fracturir	ng Fluid		Breakdo	wn Pressure fro	m		psi to		psi	Cl	e In P
Treating Press		מזונ	psi,	Minimum		psi	Avg. Pump I	Rate	CPM/B		e In P
Sand			Gals. To	reating Acid			Туре		Open I	Hole Diameter	
Well Treated	Through: Tu	bing	(	Casing		Annulus		Size		Weight	
Remarks:										-	
											F
No. Perforatio	ons			Pay	Formation Nar	ne			Depth o	of Job	
							1	INVOICE	SECTION,	1 22	
				Transport of the Parks	Pumping	Charge	0 100	-1 Ou	0/1	P/1 8	360,-
					rumping	Charge					in the state of
ar dige	a and		1.7 0 300	× 1021-100	A PROPERTY.		HARD TO THE		Division Charles		
					23						
										\$	
						_ Gals., Aci	d				
					27				9/40	52 S. (P.N.)	2001 6-6
					96	Sacks Bul	k Cement		-	\$	
7 <del>-11-212-</del>	Well (	Owner, Operator o	Contractor		Ton Mil	eage on Bul	k Cement	20 h	1105	\$	7 3111
					2011						
						-	3 SY /	REMI	SEL "	635	212
						a	F 1110	- 4	445	38 44	150
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								- 14	التميل	N I X STA	0.70
								N. 40			2019
					11-12					\$	1075.0

Conservation Division 266 N. Main St., Ste. 220 Wichita, KS 67202-1513



Phone: 316-337-6200 Fax: 346-337-6211 http://kcc.ks.gov/

Laura Kelly, Governor

Dwight D. Keen, Chair Shari Feist Albrecht, Commissioner Susan K. Duffy, Commissioner

May 29, 2019

Ron Hughes Landowner PO Box 62 Wellsville, KS 66092

Re: Plugging Application API 15-059-22062-00-00 C AND O 1 SE/4 Sec.28-15S-21E Franklin County, Kansas

#### Dear Ron Hughes:

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

Under K.A.R. 82-3-113(b)(2), you must notify DISTRICT 3 of your proposed plugging plan at least 5 days before plugging the well. DISTRICT 3's phone number is (620) 902-6450. Failure to notify DISTRICT 3, 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 November 25, 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 November 25, 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 3