

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	Apollo Energies, Inc.
Well Name	NORTON 2-18
Doc ID	1535617

Perforations And Bridge Plug Sets

Perforation Top	Perforation Base	Formation	Bridge Plug Depth
4151	4161	Lansing	
4536	4539	Mississippi	
4554	4558	Mississippi	

STATE CORPORATION COMMISSION OF KANSAS  
OIL & GAS CONSERVATION DIVISION

WELL COMPLETION OR RECOMPLETION FORM  
ACO-1 WELL HISTORY

DESCRIPTION OF WELL AND LEASE

Operator: License # 5293  
Name Helmerich & Payne, Inc.  
Address P.O. Box 558  
City/State/Zip Garden City, Kansas 67846

Purchaser Koch Industries

Operator Contact Person Millard Lindsay  
Phone 316-276-3693

Contractor: License # 5302  
Name Red Tiger

Wellsite Geologist Alan Downing  
Phone 913-625-3550, Hays, Kansas

Designate Type of Completion

- New Well  Re-Entry  Workover
- Oil  SWD  Temp Abd
- Gas  Inj  Delayed Comp.
- Dry  Other (Core, Water Supply etc.)

If OWWO: old well info as follows:

Operator  
Well Name  
Comp. Date Old Total Depth

WELL HISTORY

Drilling Method:

- Mud Rotary  Air Rotary  Cable State Test

8-13-85 8-23-85 11-19-85  
Spud Date Date Reached TD Completion Date  
4580 4563  
Total Depth PBTD

Amount of Surface Pipe Set and Cemented at 258 feet  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set...feet  
If alternate 2 completion, cement circulated from 2139 feet depth to Surf w/500 SX cmt

API NO. 15-0-22895-0000  
County Ness  
C NW NE Sec 18 Twp 16<sup>S</sup> Rge 26  East  West

4620 Ft North from Southeast Corner of Section  
1980 Ft West from Southeast Corner of Section  
(Note: Locate well in section plat below)

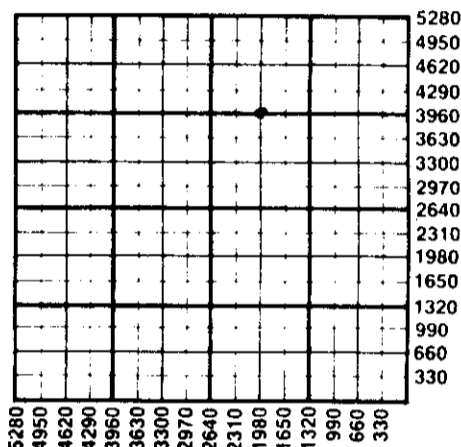
Lease Name Norton Well # 2-18

Field Name Prairie Ridge

Producing Formation Lansing, I.

Elevation: Ground 2649 KB 2654

Section Plat



WATER SUPPLY INFORMATION

Disposition of Produced Water:  Disposal  Repressuring  
Docket #

Questions on this portion of the ACO-1 call:  
Water Resources Board (913) 296-3717

Source of Water:  
Division of Water Resources Permit #

Groundwater...Ft North from Southeast Corner (Well) ...Ft West from Southeast Corner of Sec Twp Rge  East  West

Surface Water...Ft North from Southeast Corner (Stream, pond etc)...Ft West from Southeast Corner Sec Twp Rge  East  West

Other (explain) Hauled by private contractor (purchased from city, R.W.D. #)

INSTRUCTIONS: This form shall be completed in duplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 90 days after completion or recompletion of any well. Rule 82-3-130 and 82-3-107 apply.

Information on side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form. See rule 82-3-107 for confidentiality in excess of 12 months. One copy of all wireline logs and drillers time log shall be attached with this form. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Signature Ken G...  
Title District Production Engineer Date 11-25-85

Subscribed and sworn to before me this 25th day of November 1985.  
Notary Public Betty J. P...  
Date Commission Expires August 8, 1986

K.C.C. OFFICE USE ONLY  
F  Letter of Confidentiality Attached  
C  Wireline Log Received  
C  Drillers Timelog Received  
Distribution  
 KCC  SWD/Rep  NGPA  
 KGS  Plug  Other (Specify)

NOV 28 1985  
11-26-85  
KANSAS CORPORATION COMMISSION  
WICHITA, KANSAS

SIDE TWO

Operator Name Helmerich & Payne, Inc. Lease Name Norton Well # 2-18

Sec. 18 Twp. 16<sup>S</sup> Rge. 26  East  West County Ness

WELL LOG

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface during test. Attach extra sheet if more space is needed. Attach copy of log.

Drill Stem Tests Taken  Yes  No  
 Samples Sent to Geological Survey  Yes  No  
 Cores Taken  Yes  No

DST#1 4145-4169 Lansing I  
 30-60-60-120  
 IHP-2142 FHP-2101  
 IFP-41 to 51 FFP- 51to51  
 ISIP - 565 FSIP - 565  
 Rec: 30' GOCM, 35' GSOCM, 560' gas

DST#2 4527-4550 Miss  
 30-60-60-120  
 ISIP-1185 Misrum  
 Rec 120' Drly Mud

DST#3 4460-4550 Miss  
 30-60-60-120  
 IHP-2297 FHP-2256  
 IFP-92 to 92 FFP- 92 to 92  
 ISIP- 833 FSIP - 802  
 Rec 10' drly mud.

Formation Description  
 Log  Sample

Name	Top	Bottom
Topeka	3636	
Heebner	3882	
Toronto	3903	
Lansing A	3921	
Lansing D	4006	
Lansing H	4113	
Lansing I	4151	
KC A	4178	
Marmaton Unc.	4270	
Pawnee	4374	
Ft. Scott	4435	
Cherokee	4460	
Miss	4532	
Miss(Osage)	4546	
DTD	4580	
LTD	4582	

CASING RECORD <input checked="" type="checkbox"/> New <input checked="" type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (in O.D.)	Weight Lbs/Ft.	Setting Depth	Type of Cement	#Sacks Used	Type and Percent Additives
Surface	12 1/2	8 5/8	23	258	60/40poz	165	2%gel, 3%CaCl <sub>2</sub>
Long String	7 7/8	4 1/2	10.5	4579	Expanding Howcolite Class A	180 450 50	0.75% C-322 1/4#/sk floccle
PERFORATION RECORD				Acid, Fracture, Shot, Cement Squeeze Record			
Shots Per Foot	Specify Footage of Each Interval Perforated			(Amount and Kind of Material Used)			Depth
2	4536-39	4541-45	4554-58	500 gal	15% MCA		
2	" "	" "	" "	1500 gal	MOD 20Z		
1	4151-4161			750 gals	15% MCA		CTBP@4250
1	" "			1500 gals	15% NE		
TUBING RECORD				Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Date of First Production		Size	Set At	Packer at			
9-17-85		2 3/8	4221				
Producing Method		<input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (explain).....					
Estimated Production Per 24 Hours		Oil	Gas	Water	Gas-Oil Ratio	Gravity	
6 Bbls		0 MCF	25 Bbls	CFPB			

METHOD OF COMPLETION

Production Interval

Disposition of gas:  Vented  Open Hole  Perforation  
 Sold  Other (Specify) .....  
 Used on Lease  
 NONE  Dually Completed  Commingled

Lans I  
 .....  
 4151-4161  
 .....



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

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

Susan K. Duffy, Chair  
Dwight D. Keen, Commissioner  
Andrew J. French, Commissioner

Laura Kelly, Governor

November 09, 2020

Josh Rennaker  
Apollo Energies, Inc.  
10378 N 281 HWY  
PRATT, KS 67124-7920

Re: Plugging Application  
API 15-135-22895-00-00  
NORTON 2-18  
NE/4 Sec.18-16S-26W  
Ness County, Kansas

Dear Josh Rennaker:

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 May 08, 2021. 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 May 08, 2021 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