

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



## PRE-PULL

Date: 11/11/21 Well: HCU 1021 B Zone: Winfield-KS County: HAMILTON  
EGM #:        API #: 1507520230 Long: -101.80539 Lat: 38.15163  
Legal's: NW SE1/4,10-22S-41W Repeat Failure: NO Critical Lease: NO

Field Office: Lakin Area: NW Heritage: DOMINION Route: HUG 060  
Lease Operator: Doug Bloyd Cell# 620-872-4065  
Artificial Lift Diagnostics: Derek Godfrey Cell# 620-453-1345  
Production Foreman: Greg Watson Cell#620-510-9918  
Workover Foreman: NA  
Production Engineer: Alex Clem Cell# 832-545-7922  
Chemical Contact: Mike Rivers Cell# 620-482-2414

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T.D.: 2808' P.B.T.D.: 2795' K.B.: 4?' S.N.: 2774' Perforations: 2745' - 2751'  
Casing: 4.5" #9.5Liner: NONE Perforation Interval: 6'  
Tubing Count-Size: 91-2.375" Tubing Subs: 1-10', 3-2' Tubing Age: ?  
Bottom Hole Assembly: NONE  
Rod Count-Size: 110-.750" Rod Subs: NONE Rod String Age: 9/97  
Polish Rod Size - Length: 1.25" x 22' Polish Rod Liner: 1.5"x8'  
Pump Description: 2"X1.5"X10' RWBC On - Off Tool?: ?  
Unit Size (Complete Unit Number): HESTON 114  
Stroke Length: 64" Strokes Per Minute: 5 Motor Type: GAS  
Motor HP: 15 Run Time: % Water Rate: 1 (BWPD)  
Chemical Treatment?: NO Treatment Type: NONE  
Anchors?: NO Anchor Test Date:        **FAA Permit Required?: NO**  
Irrigation Tap: NO House Tap: NO H2S: YES PPM: <5  
Are over-head power lines less than 100' from wellhead?: NO  
Current Production: 0 Normal Production: 24 Production Loss: <24>  
**Well Failure Date:**        Date of Last Production: 4/30/11  
Time to log off to 0 if known:       

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Last Three Well Failures:  
5/04 ROD PART, PULL TUBE PARTED  
9/97 RE-FRAC, ROD UP WELL  
9/90 SWAB

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Diagnostics Comments: TA HAS EXPIRED, NO TANK ON LOCATION, HAS ANCHORS, WHEAT CROP, LEASE ROAD OK,

Driving Directions: SYRACUSE 10N, 4W, 1-1/2N, 1-1/2E, SE INTO

SCOUT

**Lease & Well No.** HCU 1021 B  
**Field Name** Bradshaw (Winfield)  
**Location - Legal** NW SE S10 T22S R41W  
**Location - GPS** Long: -101.80539 Lat: 38.15163 NAD27  
**K.B. Elevation** 3,630'  
**D.F. Elevation** \_\_\_\_\_  
**Ground Level** 3,630'

**Former Name** \_\_\_\_\_  
**County & State** Hamilton, KS  
**API No.** 15-075-20230

Surface Casing					
Size	8-5/8"	Weight	24#	Depth	260'
Grade		Sx. Cmt.	200 sx	TOC @	Unknown
Drilled	12-1/4"				

Intermediate Casing					
Size		Weight		Depth	
Grade		Sx. Cmt.		TOC @	
Drilled					

Production Casing					
Size	4.5"	Weight	9.5#	Depth	2,807'
Grade		Sx. Cmt.	550 sx	TOC @	Unknown
Drilled	7-7/8"				

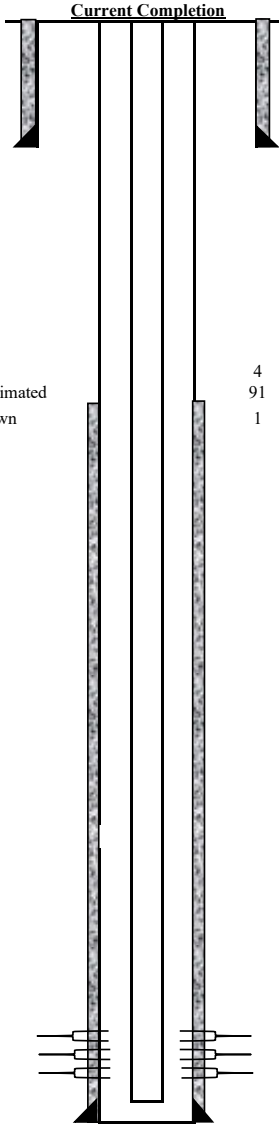
**Well History**

**Spud Date:**

**Completion Date:**

o	5/04 Rod Part, Pull tube parted
o	9/97 Re-frac, rod up well
o	9/90 Swab
o	
o	
o	
o	
o	
o	
o	

TOC - Estimated  
 @ Unknown



PBTD: 2,795'  
 TD: 2,808'

**Production Test: 04/30/11**

Oil	-	BBLS
Gas	24	MCF
Water	1	BBLS

Unit: Heston 144  
 SL: 64"  
 SPM: 5

**Artificial Lift Method: Pumping Unit**

**Production Equipment**

Tbg:	KB		
4	1-10', 3-2' subs	16.0'	16.0'
91	Jts 2 3/8" tbg	2,757.0'	2,773.0'
1	2-3/8" SN	1.0'	2,774.0'

**Rods:**

1	1-1/4"x22' PR w/ 1.5"x8' liner	22.0'	22.0'
110	3/4" Rods	2,750.0'	2,772.0'
1	2"x1.5"x10' RWBC	10.0'	2,782.0'

**Re-Perfs in Red**

Perforation Intervals		SPF	Holes
2,745'	- 2,751'		
-			
-			
-			
-			
-			
-			
-			
-			
-			

Last Edited  
 KAC - 12/03/21

December 03, 2021

ALEX CLEM  
Scout Energy Management LLC  
13800 MONTFORT DRIVE SUITE 100  
DALLAS, TX 75240-4344

Re: Plugging Application  
API 15-075-20230-00-00  
HCU 1021-B  
SE/4 Sec.10-22S-41W  
Hamilton County, Kansas

Dear ALEX CLEM:

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 June 01, 2022. 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 01, 2022 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