

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

July 2021

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 (see Chapter 55 of the Kansas Statutes Annotated), 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	Vincent Oil Corporation
Well Name	HARVEY 5
Doc ID	1655516

Perforations And Bridge Plug Sets

Perforation Top	Perforation Base	Formation	Bridge Plug Depth
3384	3390	Oread	
3440	3443	Toronto	
3456	3644	Lansing -Kansas City	

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 # 5004
Name Vincent Oil Corporation
Address 125 No. Market Suite 1110
Wichita, Kansas 67202
City/State/Zip

Purchaser Koch Oil Company
Wichita, Kansas

Operator Contact Person Richard A. Hiebsch
Phone (316) 262-3573

Contractor: License # 4958
Name Mallard Inc., J.V.

Wellsite Geologist M. L. Korphage
Phone (316) 262-3573

Designate Type of Completion
 New Well Re-Entry Workover

 Oil SWD Temp Abd
 Gas Inj Delayed Comp.
 Dry Other (Core, Water Supply etc.)

If ONNO: old well info as follows:
Operator
Well Name
Comp. Date Old Total Depth

WELL HISTORY

Drilling Method:
 Mud Rotary Air Rotary Cable

11-4-88 11-11-88 12-21-88
Spud Date Date Reached TD Completion Date

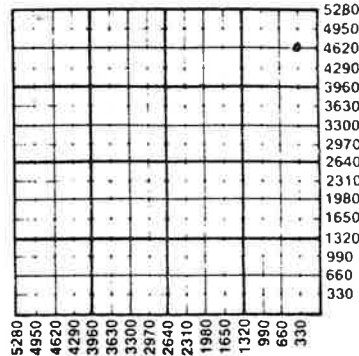
3725
Total Depth PBTD

Amount of Surface Pipe Set and Cemented at 248 feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set.....feet
If alternate 2 completion, cement circulated
from.....feet depth to.....w/.....SX cmt
Cement Company Name
Invoice #

API NO. 15-.....065-22,498
County.....Graham.....
E/2 NE. NE. Sec. 7... Twp. 6S. Rge. 21. East
 West
4620 Ft North from Southeast Corner of Section
330 Ft West from Southeast Corner of Section
(Note: Locate well in section plat below)

Lease Name Harvey Well # 5
Field Name Boys West Ext.
Toronto and
Producing Formation Lansing/Kansas City
Elevation: Ground 2201 KB 2209

Section Plat



WATER SUPPLY INFORMATION

Disposition of Produced Water: Disposal
Docket # CD-128114 Repressuring
C-20,496

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).....
(purchased from city, R.W.D. #)

INSTRUCTIONS: This form shall be completed in triplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 120 days of the spud date of any well. Rule 82-3-130, 82-3-107 and 82-3-106 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 Richard A. Hiebsch
Title Vice President Date 1-4-89

Subscribed and sworn to before me this 4th day of January 1989.
Notary Public Julie K. Stout
Date Commission Expires July 23, 1989



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

Sec. Twp. Rge.

Operator Name Vincent Oil Corporation Lease Name Harvey Well # 5

Sec. 7 Twp. 6.S Rge. 21 East West County Graham

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	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	Formation Description <input checked="" type="checkbox"/> Log <input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
Cores Taken	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	

DST No. 1 3358-3391
 30" 45" 30" 45"
 1st open: Strong blow in 4 min.
 2nd open: Strong blow in 5 min.
 Rec: 440' GIP
 1140' FO
 60' MCO (65% oil, 35% mud)
 60' OCM (25% oil, 75% mud)
 IFP 180-328# FFP 444-497#
 ISIP 989# FSIP 989# BHT 112

DST No. 2 3398-3470
 30" 45" 45" 60"
 1st open: Weak increasing to off bottom blow
 2nd open: Weak increasing to strong blow
 Rec: 311' Fluid
 11' OCM (3% oil, 97% mud)
 60' OCM (25% oil, 75% mud)
 240' MCO (65% oil, 34% mud, 1 water)
 IFP 116-158# FFP 190-201# ISIP 307# FSIP 328# BHT 112

CASING RECORD <input 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 1/8"	8 5/8"	24#	248.17	60/40	165	2% gels
Production		4 1/2"	10 1/2#	3715	Pozmix Surefill	125	3% G.C. 10% salt
Top stage					50/50 Poz	400	10% gels
PERFORATION RECORD				Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used) Depth			
Shots Per Foot	Specify Footage of Each Interval Perforated						
4	3632-3634 & 3641-3644			1500 gals. 28 HCL Acid			
4	3600-3603 & 3610-3614			1500 gals. 15 MCA			
4	3491-3493 & 3506-3508			1000 gals. 28 HCL Acid			
4	3440-3443 & 3456-3459			1500 gals. 15 MCA			
TUBING RECORD				Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Size		Set At		Packer at			
2 7/8"		3683.66		N/A			
Date of First Production		Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (explain).....					
12-30-88							
Estimated Production Per 24 Hours		Oil	Gas	Water	Gas-Oil Ratio	Gravity	
80 Bbls		0 MCF	15 Bbls	N/A	CFPB		

METHOD OF COMPLETION

Production Interval

Disposition of gas: Vented Open Hole Perforation
 Sold Other (Specify) see perforation
 Used on Lease Dually Completed record
 Commingled

Drill Stem Tests (continued)

DST No. 3 3468-3512

30" 45" 45" 45"

1st open: Weak blow in 2 min.

2nd open: Weak blow in 2 min.

Rec: 65' OCM (30% oil, 70% mud)

IFP 105-105# FFP 105-105#

ISIP 328# FSIP 243#

DST No. 4 3509-3538

30" 30" 15" 15"

1st open: Weak blow

2nd open: No blow, flushed tool, no help

Rec: 5' Mud

IFP 74-74# FFP 74-84#

ISIP 74# FSIP none

DST No. 5 3549-3620

45" 45" 45" 45"

1st open: Weak increasing to fair

2nd open: Weak increasing to fair

Rec: 130' GIP

110' OCM (45% oil, 55% mud)

IFP 116-116# FFP 127-127#

ISIP 550# FSIP 494#

Mallard JV, Inc.
P.O. Box 1009
McPherson, KS 67460

DRILLERS' LOG

OPERATOR: Vincent Oil Corporation 125 N. Market, Suite 1110 Wichita, KS 67202	WELL: Harvey #5 API#: 15- 065-22,498
COMMENCED: November 4, 1988	LOCATION: E2 NE NE
COMPLETED: November 11, 1988	4620 Ft. FSL, 330 Ft. FEL
TOTAL DEPTH: 3725 Ft.	Sec. 7 Twp. 6 S Rge. 21W
ELEVATION: 2201 Ft. G.L.	COUNTY: Graham
2209 Ft. K.B.	

<u>FORMATION</u>	<u>FROM</u>	<u>TO</u>
Surface	0'	252'
Shale, Sand	252	1385
Sand	1385	1596
Shale	1596	1859
Anhydrite	1859	1895
Shale	1895	3141
Shale, Lime	3141	3725 R.T.D. K.C.

REMARKS

Cut 12 1/4" hole to 252' and ran 6 joints 8-5/8" x 24# x 238.67' surface casing. Set at 248.17' and cemented with 165 sacks 60/40 Pozmix, 2% gel, 3% cc. Cement did circulate. P.D. at 5:30 p.m. 11-4-88.

Ran 5 DSTs and electric log.

Ran 92 joints 4 1/2" x 10.5# x 3707' production casing. Set at 3714' and cemented with 125 sacks common, 10% salt; 30 bbl mud spacer; and 400 sacks 50/50 Pozmix, 10% gel. Cement did circulate. P.D. at 6:30 p.m. 11-11-88.

DV. TOOL @ 1876'

STATE OF KANSAS)
) SS:
COUNTY OF McPHERSON)

I, BRYAN HESS of MALLARD DRILLING, do hereby certify that this is a true and correct copy of the log of the Harvey #5 well as reflected by the files of Mallard Drilling.

Bryan Hess
Bryan Hess, Gen. Mgr.

Subscribed and sworn to before me this 22nd day of November, 1988.

11/15/89
My Commission Expires

Don J. Reichenberger
Notary Public



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



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

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

Laura Kelly, Governor

July 11, 2022

M.L. Korphage
Vincent Oil Corporation
200 W DOUGLAS AVE #725
WICHITA, KS 67202-3023

Re: Plugging Application
API 15-065-22498-00-01
HARVEY 5
NE/4 Sec.07-06S-21W
Graham County, Kansas

Dear M.L. Korphage:

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 January 07, 2023. 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 January 07, 2023 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