KOLAR Document ID: 1731688

## 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. 15	
Name:	If pre 1967, supply original completion date:	
Address 1:	Spot Description:	
Address 2:	Sec Twp S. R East V	/est
City: State: Zip:	Feet from North / South Line of Sec	iion
Contact Person:	Feet from East / West Line of Sec	ion
Phone: ( )	Footages Calculated from Nearest Outside Section Corner:	
Filotie. ( )		
	County: Well #:	
	Leade 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: Sa	cks
Surface Casing Size: Set at:	Cemented with: Sa	cks
Production Casing Size: Set at:	Cemented with: Sa	cks
List (ALL) Perforations and Bridge Plug Sets:		
Elevation: ( G.L. / K.B.) T.D.: PBTD:  Condition of Well: Good Poor Junk in Hole Casing  Proposed Method of Plugging (attach a separate page if additional space is in	(Stone Corral Formation)  Leak at: (Interval)	
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 $\underline{e}$	t. seq. and the Rules and Regulations of the State Corporation Commission	
Company Representative authorized to supervise plugging operations:		
Address:	City: + +	
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** 

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## 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 (C	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 owner information can be found in the records of the register of deeds for the	
Address 1:		
Address 2:	county, and in the real estate property tax records of the county treasurer.	
City:		
the KCC with a plat showing the predicted locations of lease roads, tank are preliminary non-binding estimates. The locations may be entered on Select one of the following:   □ I certify that, pursuant to the Kansas Surface Owner Notice provided the following to the surface owner(s) of the land upon	dic Protection Borehole Intent), you must supply the surface owners and batteries, pipelines, and electrical lines. The locations shown on the plat of the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.  Act (see Chapter 55 of the Kansas Statutes Annotated), I have on which the subject well is or will be located: 1) a copy of the gin connection with this form; 2) if the form being filed is a Form operator name, address, phone number, fax, and email address.	
the KCC will be required to send this information to the surface this task, I acknowledge that I must provide the name and addr and that I am being charged a \$30.00 handling fee, payable to the surface of the surface	acknowledge that, because I have not provided this information, owner(s). To mitigate the additional cost of the KCC performing tess of the surface owner by filling out the top section of this form the KCC, which is enclosed with this form.  The 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		
Submitted Electronically		