KOLAR Document ID: 1774047

## 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	n:			
Address 2:  City:		_	SecTwp S. R East West			
		Feet from North / South Line of Section				
Contact Person:		_	Feet from		West Line of Section	
Phone: ( )			lated from Neares	st Outside Section	Corner:	
, mone. (						
		1 '				
		2000011001				
Check One: Oil Well Gas Well OG	D&A Catho	odic Water Suppl	y Well O	ther:		
SWD Permit #:	ENHR Permit #:		Gas Storage	Permit #:		
Conductor Casing Size:	_ Set at:	Cemer	nted with:		Sacks	
Surface Casing Size:	Set at:	Cemer	nted with:		Sacks	
Production Casing Size:	Set at:	Cemer	nted with:		Sacks	
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  Is Well Log attached to this application? Yes No  If ACO-1 not filed, explain why:	Casing Leak at:	(Interval)		Stone Corral Formation	,)	
Plugging of this Well will be done in accordance with K.S. Company Representative authorized to supervise plugging of	-	-	-			
Address:	City	y:	State:	Zip:	+	
Phone: ( )						
Plugging Contractor License #:	Na	me:				
Address 1:	Add	dress 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: 1774047

## 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 #	Well Location:			
Name:				
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			
Contact Person:	the lease below:			
Phone: ( ) Fax: ( )				
Email Address:				
Surface Owner Information:				
Name:	When filing a Form T-1 involving multiple surface owners, attach an additional			
Address 1:	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 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	edic Protection Borehole Intent), you must supply the surface owners and k batteries, pipelines, and electrical lines. The locations shown on the plat on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.			
provided the following to the surface owner(s) of the land up Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing	Act (see Chapter 55 of the Kansas Statutes Annotated), I have pon which the subject well is or will be located: 1) a copy of the ng in 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 surfac	I acknowledge that, because I have not provided this information, e owner(s). To mitigate the additional cost of the KCC performing dress of the surface owner by filling out the top section of this form the KCC, which is enclosed with this form.			
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-	fee with this form. If the fee is not received with this form, the KSONA-1 will be returned.			
Submitted Electronically				

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



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

Laura Kelly, Governor

Andrew J. French, Chairperson Dwight D. Keen, Commissioner Annie Kuether, Commissioner

April 22, 2024

DEB BALLARD Colt Energy Inc PO BOX 388 IOLA, KS 66749-0388

Re: Plugging Application API 15-059-24524-00-00 MCCONNELL 5 NE/4 Sec.03-16S-20E Franklin County, Kansas

## Dear DEB BALLARD:

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 October 19, 2024. 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 October 19, 2024 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