KOLAR Document ID: 1784045

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

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WELL PLUGGING APPLICATION

March 2010 This Form must be Typed Form must be Signed All blanks must be Filled

Form CP-1

Form KSONA-1, Certification	n of Compliance with the Kansas Surface Owner No	otification Act,

MUST be submitted with this form.	
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OPERATOR: License #:		API No. 15		
Name:		If pre 1967, supply original	completion date:	
Address 1:		Spot Description:		
Address 2:		Sec	Twp S. R	East West
City: State:		Feet	from North /	South Line of Section
Contact Person:		Feet	from East /	West Line of Section
Phone: ()		Footages Calculated from		n Corner:
F HUHG. (/		NE N'		
		Lease Name:		
			\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
Check One: Oil Well Gas Well OG	D&A Cathodic	Water Supply Well	Other:	
SWD Permit #:	ENHR Permit #:	Gas Sto	orage 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.: Condition of Well: Good Poor Junk in Hole Proposed Method of Plugging (attach a separate page if addit Is Well Log attached to this application? Yes No	Casing Leak at:	hydrite Depth:	(Stone Corral Formatio	n)
If ACO-1 not filed, explain why:				
Plugging of this Well will be done in accordance with K. Company Representative authorized to supervise plugging	operations:		·	
Address:	City: _	State	:: Zip:	+
Phone: ()				
Plugging Contractor License #:	Name	2:		
Address 1:	Addres	ss 2:		
City:		State	э: 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: 1784045

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

CERTIFICATION OF COMPLIANCE WITH THE KANSAS SURFACE OWNER NOTIFICATION ACT

Form KSONA-
July 202
Form Must Be Typed
Form must be Signed
All blanks must be Filled

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: Zip: Contact Person:	If filing a Form T-1 for multiple wells on a lease, enter the legal description of 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: State: Zip:+	

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.

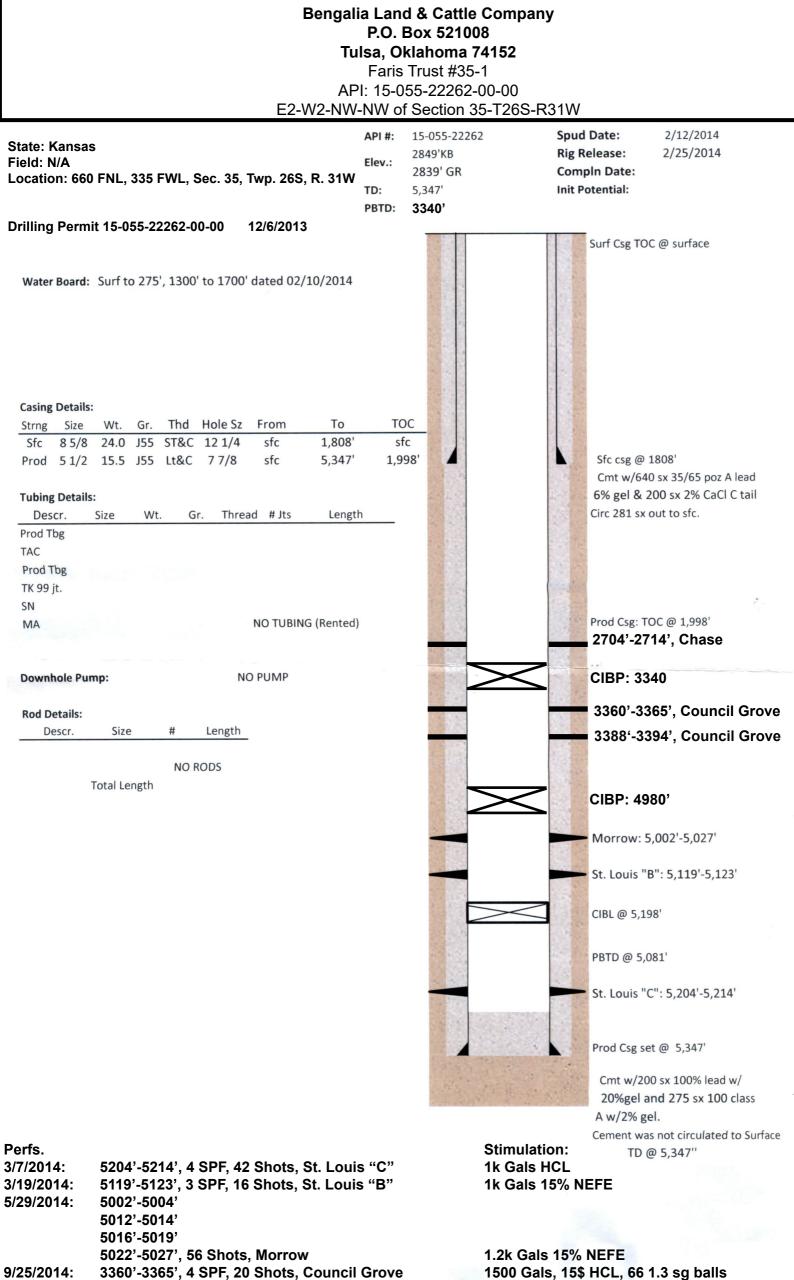
If choosing the second option, submit payment of the \$30.00 handling fee with this form. If the fee is not received with this form, the KSONA-1 form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be returned.

Submitted Electronically

Form	CP1 - Well Plugging Application				
Operator	Bengalia Land and Cattle Company				
Well Name	FARIS TRUST 35 1-35				
Doc ID	1784045				

Perforations And Bridge Plug Sets

Perforation Top	Perforation Base	Formation	Bridge Plug Depth
5204	5214	St. Louis C	5198
5119	5123	St. Louis B	
5002	5027	Morrow	4980
3360	3365	Council Grove	
3388	3394	Council Gove	3340
2704	2714	Chase	



3388'-3394', 4 SPF, 24 Shots, Council Grove 9/30/2014: 2704'-2714', 4 SPF, 40 Shots, Chase

1500 Gals, 15\$ HCL, 66 1.3 sg balls & flushed with 840 Gals 2%KCL

1000 Gals, 15% HCL, 60 1.3 sg balls, flushed with 588 Gals 2% KCL water

RING ENERGY, INC. DAILY COMPLETION REPORT

		1	otal Drilling Cost	
WORK DESCRIPTION:	RE- COMPLETION			
LOCATION:	WELL # 35-1	REPORTED TO:	JEREMY HEATLEY	
LEASE NAME:	Faris Trust	REPORT BY:	JAKE SLATTEN	
REPORT DATE:	10/3/2014	COMP RIG:		

			Contraction of the				Total Drilling Cost -		
Code		ntangible	Costs		Previous	Daily	Cumulative	Comme	ents
	BOP						-		
	Restore Loc						-		
	Completion				22,124	2,250	24,374	RAWHIDE	
	Completion Fluid						-		
Cased Hole Logs				9,474		9,474	HALLIBURTON		
	Flowback H	and					-		
	Fork Lift				-		-		
	Equipment	Rental	×		-		-		
	Trucking				225				
	Pump Truck	the second se			250		250	MAX"S WATER SERV	ICE
	Tubing Test				-				
	Reverse Un				-		-		
	Packer rent	al & Servic	e man		1,500		1,500	CF SUPPLY	
	Frac Valve				-		-		
	Well Service	es			7,840	980		CROWN	
	Perforating				7,964		7,964	HALLIBURTON	
	Acid Stimula	ation	6 K ¹ 3		6,802		6,802	CHAOSLAND	
	Fracture Sti	mulation			-		-		
	Frac QC								
	Swab Tank				-		-		
	Labor								
	Frac Tank				-				
	Welding								
	Miscellaneo				1,650			CF SUPPLY	
Total Inta	angible Con	npletion C	osts		57,829	3,230	61,059		
Code	I					Tangibles			
	Tubing		and the short Carlot Carlot and						
	Well Head				-		-		
	Pumping U	nit							
	Packers/An		r Hangers		-		-		
	Rods						-		
	Down Hole	Pumps			-		-		
	Flowline Miscellaneous Equipment					-			
				-		-			
Total Ta	ngible Com	pletion Co	osts		-	-	-		
Total Int	angibles &	Tangible (Completior	Costs	57,829	3,230	61,059		
	Miscellaneo		10.00%						
	mpletion Co				57,829		61,059		
and the second s	illing Costs	313					-		
					57,829	-	61,059		
Total Well Cost			the second s			Dumo Chan	Gas Anchor Size		
PBTD	KB	F	Perforations		Pumpir	ng Unit. MFR., Siz	e, SPIN, SL	Pump Shop	Gas Anchor Size
		TADCIC	No. Interty	Des	kor Sot @	Dump Tu	pe and Size	Seating Nipple Set @	End of Tubing @
Tubing	g Size, Gr,	TAC Set @	No. Joints	Pac	ker Set @	Pump Ty	pe and Gize	coating ripple oet @	Line of Fubling @
No 7/8" pony rods No 7/8" rods No 3/4" rods Sin			nker Bars	Casing Size S	urface/Production	Polished Ro	od & Liner		
NI- 7/01			No 3/A" roda						

OPERATIONS:

15-1/2 hr SITP @ 395#, blew tbg down & ran tbg swab, 7:30 AM IFL @ 2350' from surface, 8:30 AM FL @ 2200', swab from SN, 4 runs, rec 4.6 bbls fluid, tbg had a blow, 9:30 AM FL @ 2200', swab from SN, 2 runs, rec 3.45 bbls fluid, tbg blow, swab tbg 2 hrs w/ 6 swab runs, rec 8.05 bbls water, have rec 53.9 bbls over acid load, rig up to run tbg, unset 5-1/2" Arrow Set I pkr & ran down 5 jts 2-3/8" tbg to check for balls on perfs, TIH & lay down all tbg, SN & pkr, nipple down & released BOP, took off tbg head & install a 5-1/2" x 2" XO w/ valve & shut well in, RD&R Rawhide Well Service, called to have frac tank emptied

Operations @ Report Time:

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

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

June 27, 2024

Calvin R. Hullum, Jr. Bengalia Land and Cattle Company PO BOX 521008 TULSA, OK 74152-1008

Re: Plugging Application API 15-055-22262-00-00 FARIS TRUST 35 1-35 NW/4 Sec.35-26S-31W Finney County, Kansas

Dear Calvin R. Hullum, Jr.:

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 December 24, 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 December 24, 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 1



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

Laura Kelly, Governor