KOLAR Document ID: 1780562

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	5				
Name:			If pre 1967, supply original completion date:				
Address 1:		Spot Desc	cription:				
Address 2:			Sec	_ Twp S. R.	East We		
City: State:		_	Feet fr	om North /	South Line of Section		
Contact Person:		_	Feet fr	om East /	West Line of Sectio		
Phone: ()		Footages	Calculated from No	earest Outside Sector			
Thore. ()		Country			vv		
					I #:		
Check One: Oil Well Gas Well OG	D&A Catho	odic Water	Supply Well	Other:			
SWD Permit #:	ENHR Permit #:		Gas Stora	age Permit #:			
Conductor Casing Size:	Set at:		Demented with:		Sack		
Surface Casing Size:	Set at:		Demented with:		Sack		
Production Casing Size:	Set at:	(Cemented with:		Sack		
List (ALL) Perforations and Bridge Plug Sets:							
Condition of Well: Good Poor Junk in Hole Proposed Method of Plugging (attach a separate page if addition	Casing Leak at:onal space is needed):	(Interval)	-	(Stone Corral Forma	ation)		
Is Well Log attached to this application?	Is ACO-1 filed? Ye	s No					
If ACO-1 not filed, explain why:							
Plugging of this Well will be done in accordance with K.S	S.A. 55-101 <u>et. seq</u> . and the R	ules and Regula	tions of the State	Corporation Com	mission		
Company Representative authorized to supervise plugging o	perations:						
Address:	Cit	y:	State:	Zip:	++		
Phone: ()							
Plugging Contractor License #:	Na	nme:					
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: 1780562

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		
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 county, and in the real estate property tax records of the county treasurer.		
Address 1:			
Address 2:			
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 Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filling C-1 or Form CB-1, the plat(s) required by this form; and 3) my on I have not provided this information to the surface owner(s). I the KCC will be required to send this information to the surface	acknowledge that, because I have not provided this information, owner(s). To mitigate the additional cost of the KCC performing ress of the surface owner by filling out the top section of 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-1	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

June 05, 2024

Tracy Schmidt Schmidt, Tracy 308 WESTLANE RD MCPHERSON, KS 67460-9544

Re: Plugging Application API 15-113-21384-00-00 P. A. KOEHN B-1 NE/4 Sec.16-21S-03W McPherson County, Kansas

Dear Tracy Schmidt:

The Conservation Division has received your Well Plugging Application (CP-1).

Under K.A.R. 82-3-113(b)(2), you must notify DISTRICT 2 of your proposed plugging plan at least 5 days before plugging the well. DISTRICT 2's phone number is (316) 337-7400. Failure to notify DISTRICT 2, 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 02, 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 02, 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 2