

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

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
ACD-1 WELL HISTORY
DESCRIPTION OF WELL AND LEASE

ORIGINAL

APR. NO. 15- 155-21,272-0000

County Reno

C SW - NE - Sec. 15 Twp. 26S Rng. 9W

3300 Feet from SW (circle one) Line of Section

1980 Feet from SW (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
NE, SE NW or SW (circle one)

Lease Name Whipple A Well # 3

Field Name Lerado

Producing Formation Viola

Elevation: Ground 1679 KB 1684

Total Depth 4298 PBTD 4300

Amount of Surface Pipe Set and Cemented at 305 Feet

Multiple Stage Cementing Collar Used? Yes X No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from 305

feet depth to surface w/ 225 sx cnt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)

Chloride content 50MCL-2100GA Fluid volume 440 bbls.

De-watering method used Hauled to disposal well

Location of fluid disposal if hauled offsite:

Operator Name Fairchild Exploration Inc.

Lease Name Nunemaker SWD License No. 9533

SE Quarter Sec. 10 Twp. 26S Rng. 9W E/W

County Reno Docket No. D-26,193

Operator: License # 9533

Name: Fairchild Exploration Inc.

Address R.R. 3

Kingman, Kansas 67068

City/State/Zip _____

Purchaser: NCRA

Operator Contact Person: Bob G. Fairchild

Phone (316) 532-3047

Contractor: Name: White & Ellis Drilling Inc.

License: _____

Wellsite Geologist: None

Designate Type of Completion
 New Well Re-Entry Workover

Oil SWD SIOW Temp. Abd.

Gas ENHR SIGW

Dry Other (Core, W&V, Expl., Cathodic, etc)

If Workover/Re-Entry: old well info as follows:

Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

Deepening Re-perf. Conv. to Inj/SWD

Plug Back PBTD

Commingled Docket No. _____

Dual Completion Docket No. _____

Other (SWD or Inj?) Docket No. _____

7-19-93 7-27-93 8-20-93
Spud Date Date Reached TD Completion Date.

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 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 geologist well report shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. 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 Jules Fairchild

Title Vice President Date 5-25-94

Subscribed and sworn to before me this 25th day of May, 19 94.

Notary Public Sandy Trollope

Date Commission Expires 2-19-98

SANDY TROLLOPE
Notary Public - State of Kansas
My Appt. Expires 2-19-98

6-1-94

SEARCHED INDEXED SERIALIZED FILED
K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
C Geologist Report Received
DISTRIBUTION
KCC SVD/Rep NGPA
KCB Wichita, Kansas Other
(Specify)

Form ACD-1 (7-91)

Operator Name Fairchild Exploration Inc.

Lease Name Whipple A

Well # 3

Sec. 15 Twp. 26 Rge. 9

East
 West

County Reno

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 sheets if more space is needed. Attach copy of log.

Drill Stem Tests Taken Yes No
(Attach Additional Sheets.)

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No
(Submit Copy.)

Log Name	Formation (Top)	Depth and Datum	Sample Datum
Miss.		3880	
Viola		4138	
Simpson		4234	

List All E.Logs Run:

Radiation Guard
Compensated Density Neutron
Compensated Sonic M.S.G.
Dual Induction

CASING RECORD <input checked="" 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 1/4	8 5/8	20#	305	60/40 poz	225	2%gel, 3%calc
production	7 7/8	5 1/2	15 1/2	4298	ASG	155	2% gel

ADDITIONAL CEMENTING/SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate				
<input type="checkbox"/> Protect Casing				
<input type="checkbox"/> Plug Back TD				
<input type="checkbox"/> Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
sand cut	4139		

TUBING RECORD Size 2 7/8 Set At 3000 Packer At _____ Liner Run Yes No

Date of First, Resumed Production, SMD or Inj. Sept 22-93 Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours Oil 29 Bbls. Gas 300 Mcf Water 300 Bbls. Gas-Oil Ratio _____ Gravity 43

Disposition of Gas: Vented Sold Used on Lease
(If vented, submit ACG-18.)

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Cemented Other (Specify) Sand cut

Production Interval 4139

Well, Kansas
 Well, Great Bend, Kansas

ORIGINAL

Phone Plainville 913-434-2812

Phone Ness City 913-798-3843

ALLIED CEMENTING CO., INC.

1270

Home Office P. O. Box 31

Russell, Kansas 67665

New

Date	7/20/93	Sec.	15	Twp.	267	Range	9W	Called Out	10:00	On Location	11:00	Job Start	2:40	Finish	3:15
Lease	Whipple	Well No.	3A			Location	Pealosa 4N 2E 34N W15			County	RECRO	State	KS		

Contractor	White & Ellis		
Type Job	CMT 8 3/4 SURFACE CSY		
Hole Size	12 1/4	T.D.	306
Csg.	8 5/8 20"	Depth	305
Tbg. Size		Depth	
Drill Pipe		Depth	
Tool		Depth	
Cement Left in Csg.	15	Shoe Joint	15
Press Max.	150	Minimum	50
Meas Line		Displace	19
Perf.			

Owner Same
 To Allied Cementing Co., Inc.
 You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.

Charge To Fairchild Exploration
 Street BOULE 3
 City KINGMAN State KS 67008
 The above was done to satisfaction and supervision of owner agent or contractor.

Purchase Order No.
 X James Cromwell

EQUIPMENT

Pumptrk	No.	Cementor	Maxball
	237	Helper	Justin Hart
Pumptrk	No.	Cementor	
	242	Helper	
Bulktrk		Driver	John Kelley
		Driver	

CEMENT

Amount Ordered	225 sks 60' 40' 29 gal 3% cacl		
Consisting of			
Common	135 sks	5.75	776.25
Poz. Mix	90 gal	3.00	270.00
Gel.	5	7.00	35.00
Chloride	7 gal	25.00	175.00
Quickset			
Handling	225	1.00	225.00
Mileage	35		315.40
Sales Tax			
Sub Total			1798.25
Total			1798.25

DEPTH of Job

Reference:	305 FT Pump Charge	431.95
	35 mi Mileage 225	78.75
	1 Ea 8 5/8 Toy Wood Plug	42.00
	Sub Total	
	5 Tax	
	Total	\$552.70

Floating Equipment
 TOTAL 2350.35
 Less 1710.07

Remarks: CMT 8 3/4 SURFACE CSY WITH 225 SKS
 60' 40' 29 gal 3% cacl 2 Drop Plug
 Displace 19 BBL Closin Head CMT
 Did circulate

RECEIVED
 STATE COMMISSION
 JUN 09 1994
 CONSERVATION DIVISION
 Wichita, Kansas

band, Kansas

ORIGINAL

Phone Plainville 913-434-2812

Phone Ness City 913-798-3843

ALLIED CEMENTING CO., INC.

1292

Home Office P. O. Box 31

Russell, Kansas 67665

New

Date	7-27-93	Sec.	15	Twp.	26	Range	9	Called Out	12:18 AM	On Location	3:00 AM	Job Start	11:30 AM	Finish	1:00 PM
Lease	Whipple	Well No.	3-A	Location	Langdon	25-2E-26S-W1110			County	Reno	State	Ks			
Contractor	WFE														
Type Job	PIPE JOB														
Hole Size	7 7/8	T.D.	4300												
Csg.	5 1/2	Depth	4300												
Tbg. Size		Depth													
Drill Pipe		Depth													
Tool		Depth													
Cement Left in Csg.	4290	Shoe Joint	4290												
Press Max.		Minimum													
Meas Line		Displace	101												
Perf.															

Owner Same

To Allied Cementing Co., Inc.
You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.

Charge To Fairchild Exploration

Street- Box 780472

City- Wichita State- Mo. 67278

The above was done to satisfaction and supervision of owner agent or contractor.

Purchase Order No.

X

EQUIPMENT

No.	Cementor	Don H
Pumptrk 195	Helper	Kent
No.	Cementor	
Pumptrk	Helper	
	Driver	RICK
Bulktrk 101	Driver	

CEMENT		
Amount Ordered	155 sk ASC	18 Gel
Consisting of	300 gals. mud sweep	
Common	155 ASC	7.50 1162.50
Poz. Mix		
Gel.	18	7.00 126.00
Chloride		
Quickset		
Mud Sweep	300 gals.	1.80 540.00
Handling	155	1.00 155.00
Mileage	35	217.00
TOTAL \$ 3831.25		
Disc - 766.25		
TOTAL \$ 3065.00		2200.50
Floating Equipment		

DEPTH of Job	4300'
Reference:	Pump Truck 1038.00
	35 mileage 178.75
	Plus 45.00
	Total 1161.75

Remarks: Pumped 300 Gal mud Flush
Plugged Rat Hole mixed all
Cement + Washed UP
Displaced Down Landed plug
at 1000' Released BY Allied
Cementing. Thanks Don

15 1/2 Insert - 189.00

5 1/2 Cent 1912 - 280.00

19.00

CONSERVATION DIVISION
Wichita, Kansas

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



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

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

Laura Kelly, Governor

October 30, 2024

Alyssa Landwehr
H3 Oil & Gas
11340 SE WALSTEAD RD
SHARON, KS 67138-9091

Re: Plugging Application
API 15-155-21272-00-00
WHIPPLE A3
NE/4 Sec.15-26S-09W
Reno County, Kansas

Dear Alyssa Landwehr:

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 April 28, 2025. 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 April 28, 2025 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