

Confidentiality Requested:

☐ Yes ☒ NoKANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1

January 2018

Form must be Typed

Form must be Signed

All blanks must be Filled

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 33883

Name: Magellan Pipeline Company LP

Address 1: 100 WEST 5TH ST MD16-304

Address 2:

City: TULSA State: OK Zip: 74103 + 4207

Contact Person: Tyler Kraus

Phone: (913) 523-4587

CONTRACTOR: License # 35834

Name: Citation Drilling & Boring, LLC

Wellsite Geologist: NA

Purchaser:

Designate Type of Completion:

☒ New Well ☐ Re-Entry ☐ Workover☐ Oil ☐ WSW ☐ SWD☐ Gas ☐ DH ☐ EOR☐ OG ☐ GSW☐ CM (Coal Bed Methane)☒ Cathodic ☐ Other (Core, Expl., etc.):

If Workover/Re-entry: Old Well Info as follows:

Operator:

Well Name:

Original Comp. Date: Original Total Depth:

☐ Deepening ☐ Re-perf. ☐ Conv. to EOR ☐ Conv. to SWD☐ Plug Back ☐ Liner ☐ Conv. to GSW ☐ Conv. to Producer☐ Commingled Permit #:☐ Dual Completion Permit #:☐ SWD Permit #:☐ EOR Permit #:☐ GSW Permit #:

3/3/2020 3/6/2020 3/6/2020

Spud Date or
Recompletion Date Date Reached TD Completion Date or
Recompletion Date

API No.: 15-155-21772-00-00

Spot Description:

NW NW-NW Sec. 1 Twp. 26 S. R. 7 ☐ East ☒ West6465 Feet from ☐ North / ☒ South Line of Section5118 Feet from ☒ East / ☐ West Line of Section

Footages Calculated from Nearest Outside Section Corner:

☐ NE ☐ NW ☒ SE ☐ SW

GPS Location: Lat: (e.g. xx.xxxxx), Long: (e.g. -xxx.xxxxx)

Datum: ☐ NAD27 ☐ NAD83 ☐ WGS84

County: Reno

Lease Name: PRETTY PRAIRIE MP 63.050 Well #: 1

Field Name:

Producing Formation: Cathodic

Elevation: Ground: 1582 Kelly Bushing: 1582

Total Vertical Depth: 350 Plug Back Total Depth:

Amount of Surface Pipe Set and Cemented at: 140 Feet

Multiple Stage Cementing Collar Used? ☐ Yes ☒ No

If yes, show depth set: Feet

If Alternate II completion, cement circulated from:

feet depth to: w/ sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 0 ppm Fluid volume: 318 bbls

Dewatering method used: Hauled to Disposal

Location of fluid disposal if hauled offsite:

Operator Name: Magellan Pipeline Company

Lease Name: Barton County Solid Waste License #: 33883

Quarter SW Sec. 12 Twp. 19 S. R. 13 ☐ East ☒ West

County: Barton Permit #: NA

AFFIDAVIT

I am the affiant and I hereby certify that 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.

Submitted Electronically

KCC Office Use ONLY

☐ Confidentiality Requested

Date:

☐ Confidential Release Date:☐ Wireline Log Received ☐ Drill Stem Tests Received☐ Geologist Report / Mud Logs Received☐ UIC DistributionALT ☐ I ☐ II ☒ III Approved by: Alexis Vincent Date: 11/14/2025

Operator Name: Magellan Pipeline Company LP Lease Name: PRETTY PRAIRIE MP 63.050 Well #: 1
 Sec. 1 Twp. 26 S. R. 7 ☐ East ☒ West County: Reno

INSTRUCTIONS: Show important tops of formations penetrated. Detail all cores. Report all final copies of drill stems 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 test, along with final chart(s). Attach extra sheet if more space is needed.

Final Radioactivity Log, Final Logs run to obtain Geophysical Data and Final Electric Logs must be emailed to kcc-well-logs@kcc.ks.gov. Digital electronic log files must be submitted in LAS version 2.0 or newer AND an image file (TIFF or PDF).

Drill Stem Tests Taken ☐ Yes ☒ No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey ☐ Yes ☒ No Cores Taken ☐ Yes ☒ No Electric Log Run ☐ Yes ☒ No Geologist Report / Mud Logs ☐ Yes ☒ No List All E. Logs Run:	☐ Log Formation (Top), Depth and Datum ☐ Sample Name NA Top NA Datum NA
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CASING RECORD ☒ New ☐ 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	16	10	11.05	140	Cement	414	

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
☐ Perforate	-			
☐ Protect Casing				
☐ Plug Back TD				
☐ Plug Off Zone	-			

1. Did you perform a hydraulic fracturing treatment on this well? ☐ Yes ☒ No *(If No, skip questions 2 and 3)*
2. Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons? ☐ Yes ☐ No *(If No, skip question 3)*
3. Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry? ☐ Yes ☐ No *(If No, fill out Page Three of the ACO-1)*

Date of first Production/Injection or Resumed Production/Injection:		Producing Method: ☐ Flowing ☐ Pumping ☐ Gas Lift ☐ Other (Explain) _____			
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

DISPOSITION OF GAS: ☐ Vented ☐ Sold ☐ Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: ☐ Open Hole ☐ Perf. ☐ Dually Comp. ☐ Commingled <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: Top Bottom

Shots Per Foot	Perforation Top	Perforation Bottom	Bridge Plug Type	Bridge Plug Set At	Acid, Fracture, Shot, Cementing Squeeze Record <i>(Amount and Kind of Material Used)</i>
TUBING RECORD: Size: Set At: Packer At:					

Form	ACO1 - Well Completion
Operator	Magellan Pipeline Company LP
Well Name	PRETTY PRAIRIE MP 63.050 1
Doc ID	1868758

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight	Setting Depth	Type Of Cement	Number of Sacks Used	Type and Percent Additives
Surface	16	10	11.05	140	Cement	414	

Confidentiality Requested:

☐ Yes ☒ No

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1

July 2014

Form must be Typed
Form must be Signed
All blanks must be Filled

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 33883

Name: Magellan Pipeline Company LP

Address 1: 1 Williams CTR OTC-9

Address 2:

City: Tulsa State: OK Zip: 74172 +

Contact Person: Tyler Kraus

Phone: (913) 523-4587

CONTRACTOR: License # 791

Name: Giles Environmental Services, Inc.

Wellsite Geologist:

Purchaser:

Designate Type of Completion:

- ☒ New Well ☐ Re-Entry ☐ Workover
- ☐ Oil ☐ WSW ☐ SWD ☐ SLOW
☐ Gas ☐ D&A ☐ ENHR ☐ SIGW
☐ OG ☐ GSW ☐ Temp. Abd.
☐ CM (Coal Bed Methane)
☒ Cathodic ☐ Other (Core, Expl., etc.):

If Workover/Re-entry: Old Well Info as follows:

Operator:

Well Name:

Original Comp. Date: Original Total Depth:

- ☐ Deepening ☐ Re-perf. ☐ Conv. to ENHR ☐ Conv. to SWD
☐ Plug Back ☐ Conv. to GSW ☐ Conv. to Producer

- ☐ Commingled ☐ Dual Completion
☐ SWD ☐ ENHR ☐ GSW
- Permit #:
Permit #:
Permit #:
Permit #:
Permit #:

3/3/2020 3/6/2020 3/6/2020
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - GMD 2 CPB-102

Spot Description:

NW NW NW NW Sec. 1 Twp. 26 S. R. 7 ☐ East ☒ West

6,465 Feet from ☒ North / ☐ South Line of Section

5,118 Feet from ☒ East / ☐ West Line of Section

Footages Calculated from Nearest Outside Section Corner:

☐ NE ☐ NW ☒ SE ☐ SW

GPS Location: Lat: , Long:
(e.g. xx.xxxxx) (e.g. -xxx.xxxxx)

Datum: ☐ NAD27 ☐ NAD83 ☐ WGS84

County: Reno

Lease Name: MP 63.050 Pretty Prairie Well #: 1

Field Name:

Producing Formation:

Elevation: Ground: 1582 Kelly Bushing: 1582

Total Vertical Depth: 350 Plug Back Total Depth:

Amount of Surface Pipe Set and Cemented at: 140 Feet

Multiple Stage Cementing Collar Used? ☐ Yes ☒ No

If yes, show depth set: Feet

If Alternate II completion, cement circulated from:

feet depth to: w/ sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: ppm Fluid volume: bbls

Dewatering method used:

Location of fluid disposal if hauled offsite:

Operator Name:

Lease Name: License #:

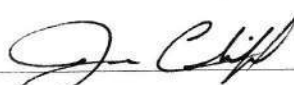
Quarter Sec. Twp. S. R. ☐ East ☐ West

County: Permit #:

INSTRUCTIONS: The original form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. If confidentiality is requested and approved, side two of this form will be held confidential for a period of 2 years. Rules 82-3-130, 82-3-106 and 82-3-107 apply. Drill Stem Test, Cement Tickets and Geological Well Report must be attached.

AFFIDAVIT

I am the affiant and I hereby certify that 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: 

Title: Project Manager Date: 4/10/2020

KCC Office Use ONLY

☐ Confidentiality Requested

Date:

☐ Confidential Release Date:

☐ Wireline Log Received

☐ Geologist Report Received

☐ UIC Distribution

ALT ☐ I ☐ II ☐ III Approved by: Date:

Operator Name: Magellan Pipeline Company LP Lease Name: MP 63.050 Pretty Prairie Well #: 1
 Sec. 1 Twp. 26 S. R. 7 ☐ East ☒ West County: Reno

INSTRUCTIONS: Show important tops of formations penetrated. Detail all cores. Report all final copies of drill stems 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 test, along with final chart(s). Attach extra sheet if more space is needed.

Final Radioactivity Log, Final Logs run to obtain Geophysical Data and Final Electric Logs must be emailed to kcc-well-logs@kcc.ks.gov. Digital electronic log files must be submitted in LAS version 2.0 or newer AND an image file (TIFF or PDF).

Drill Stem Tests Taken <i>(Attach Additional Sheets)</i>	☐ Yes ☒ No	☒ Log Formation (Top), Depth and Datum ☐ Sample															
Samples Sent to Geological Survey	☒ Yes ☐ No	<table style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: left;">Name</th> <th style="text-align: left;">Top</th> <th style="text-align: left;">Datum</th> </tr> <tr> <td>Silt</td> <td>0</td> <td>10</td> </tr> <tr> <td>Silt, Clay, Sand</td> <td>10</td> <td>90</td> </tr> <tr> <td>Clay/Wethered Shale</td> <td>90</td> <td>100</td> </tr> <tr> <td>Shale, Dark Gray</td> <td>100</td> <td>130</td> </tr> </table>	Name	Top	Datum	Silt	0	10	Silt, Clay, Sand	10	90	Clay/Wethered Shale	90	100	Shale, Dark Gray	100	130
Name	Top	Datum															
Silt	0	10															
Silt, Clay, Sand	10	90															
Clay/Wethered Shale	90	100															
Shale, Dark Gray	100	130															
Cores Taken Electric Log Run	☐ Yes ☒ No ☐ Yes ☒ No																
List All E. Logs Run:																	

CASING RECORD ☐ New ☐ 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	16	10	11.05	140	Cement	9 YDS	0

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
☐ Perforate ☐ Protect Casing ☐ Plug Back TD ☐ Plug Off Zone				

Did you perform a hydraulic fracturing treatment on this well? ☐ Yes ☒ No *(If No, skip questions 2 and 3)*
 Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons? ☐ Yes ☐ No *(If No, skip question 3)*
 Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry? ☐ Yes ☐ No *(If No, fill out Page Three of the ACO-1)*

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

TUBING RECORD:		Size:	Set At:	Packer At:	Liner Run:	☐ Yes ☐ No
Date of First, Resumed Production, SWD or ENHR.			Producing Method:			
			☐ Flowing ☐ Pumping ☐ Gas Lift ☐ Other <i>(Explain)</i> _____			
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity	

DISPOSITION OF GAS: ☐ Vented ☐ Sold ☐ Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: ☐ Open Hole ☐ Perf. ☐ Dually Comp. ☐ Commingled <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i> ☐ Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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Form CDP-5
July 2014
Form must be Typed

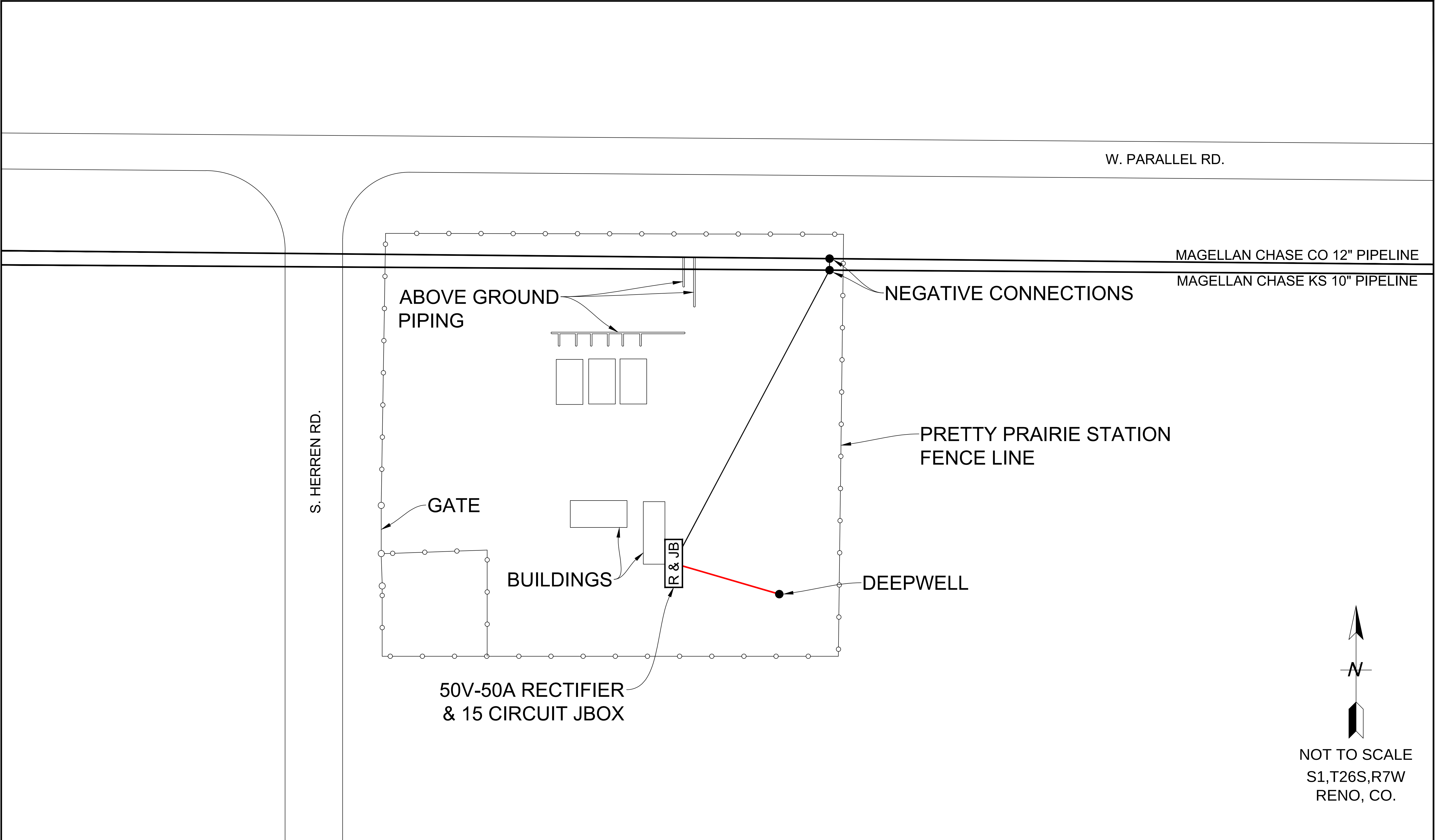
Operator Name: Magellan Pipeline Company LP		License Number: 33883	
Operator Address: 1 Williams CTR OTC-9			
Contact Person: Tyler Kraus		Phone Number: (913) 523 - 4587	
Permit Number (API No. if applicable): CPB-102		Lease Name: MP 63.050 Pretty Prairie Station	
Source of Waste:		Well Number: 1	
☐ Emergency Pit ☐ Settling Pit ☐ Workover Pit ☐ Drilling Pit ☐ Burn Pit ☐ Haul-off Pit ☒ Steel Pit ☐ Spill / Escape ☐ Dike		Source Location (QQQQ): NW - NW - NW - NW Sec. 1 Twp. 26 R. 7 ☐ East ☒ West 6465 Feet from ☐ North / ☒ South Line of Section 5118 Feet from ☒ East / ☐ West Line of Section GPS Location: Lat: _____ , Long: _____ (e.g. xx.xxxxx) (e.g. -xxx.xxxxx) Datum: ☐ NAD27 ☐ NAD83 ☐ WGS84 County: Reno	
No Waste to be Hauled: ☐ (If checked, provide an explanation as to why no waste was hauled in the Comments area.)			
Type of waste to be disposed: ☒ Fluid ☐ Soil ☒ Mud / Cuttings ☐ Other: _____			
Amount of waste: 7 No. of loads _____ Barrels 47.8 Tons _____ YDS			
Destination of waste: ☐ Reserve Pit ☐ Haul Off Pit ☐ Disposal Well ☐ Lease Road ☐ Dike / Berm ☒ Other: Barton County Landfill			
If waste is transferred to another reserve pit, is the lease active? ☐ Yes ☐ No			
Location of Waste Disposal:			
Destination Out of State: ☐ (If checked, provide the location of where the waste was hauled in the Comments area.)			
		Date of Waste Transfer: 3/6, 3/7, 3/9, 3/11	
Operator Name: _____		License No.: 33883	
Lease Name: _____		Sec. 12 Twp. 19 R. 13 ☐ East ☒ West	
Docket No./API No.: _____		County: Barton	
Comments: Magellan managed their own waste and had it hauled off to the Barton County Landfill by Haz-Mat. Haz-Mat license number = 000188			
UNDER PENALTY OF PERJURY I HEREBY ATTEST THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. Date: 4/22/2020 Signature: Title: Project Manager			

☒ Original Record ☐ Correction ☐ Change in Well Use

Well ID

CPB-102

1 LOCATION OF WATER WELL: County: Reno		Fraction NW 1/4 NW 1/4 NW 1/4 NW 1/4		Section Number 1		Township Number T 26 S		Range Number R 7 E W																																					
2 WELL OWNER: Last Name: Magellan Midstream Partners, L.P. Business: One Williams Center, OTC-9 Address: Tulsa State: OK ZIP: 74172				Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here: ☐ Well location is at the SE corner of W. Parallel Rd. & S. Herren Rd.																																									
3 LOCATE WELL WITH "X" IN SECTION BOX: 		4 DEPTH OF COMPLETED WELL: 350 ft. Depth(s) Groundwater Encountered: 1) 40 ft. 2) _____ ft. 3) _____ ft., or 4) ☐ Dry Well WELL'S STATIC WATER LEVEL: _____ ft. ☐ below land surface, measured on (mo-day-yr) _____ ☐ above land surface, measured on (mo-day-yr) _____ Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm Well water was _____ ft. after _____ hours pumping _____ gpm Estimated Yield: _____ gpm Bore Hole Diameter: 16 in. to 140 ft. and 10 in. to 350 ft.				5 Latitude: 37.824189 (decimal degrees) Longitude: -98.045102 (decimal degrees) Horizontal Datum: ☒ WGS 84 ☐ NAD 83 ☐ NAD 27 Source for Latitude/Longitude: ☐ GPS (unit make/model: _____) (WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map ☒ Online Mapper: Google Earth																																							
6 Elevation: 1582 ft. ☒ Ground Level ☐ TOC Source: ☐ Land Survey ☐ GPS ☐ Topographic Map ☒ Other Google Earth																																													
7 WELL WATER TO BE USED AS: 1. Domestic: ☐ Household ☐ Lawn & Garden ☐ Livestock 2. ☐ Irrigation 3. ☐ Feedlot 4. ☐ Industrial 5. ☐ Public Water Supply: well ID _____ 6. ☐ Dewatering: how many wells? _____ 7. ☐ Aquifer Recharge: well ID _____ 8. ☐ Monitoring: well ID _____ 9. Environmental Remediation: well ID _____ ☐ Air Sparge ☐ Soil Vapor Extraction ☐ Recovery ☐ Injection 10. ☐ Oil Field Water Supply: lease _____ 11. Test Hole: well ID _____ ☐ Cased ☐ Uncased ☐ Geotechnical 12. Geothermal: how many bores? _____ a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water 13. ☒ Other (specify): Cathodic																																													
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☐ No If yes, date sample was submitted: _____ Water well disinfected? ☐ Yes ☐ No																																													
8 TYPE OF CASING USED: ☐ Steel ☒ PVC ☐ Other _____ CASING JOINTS: ☒ Glued ☐ Clamped ☐ Welded ☐ Threaded Casing diameter 10 in. to 140 ft. Diameter _____ in. to _____ ft. Diameter _____ in. to _____ ft. Casing height above land surface _____ in. Weight _____ lbs./ft. Wall thickness or gauge No. SPR 21 TYPE OF SCREEN OR PERFORATION MATERIAL: ☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ PVC ☐ Other (Specify) _____ ☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: ☐ Continuous Slot ☐ Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify) _____ ☐ Louvered Shutter ☐ Key Punched ☐ Wire Wrapped ☐ Saw Cut ☐ None (Open Hole) SCREEN-PERFORATED INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft. GRAVEL PACK INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.																																													
9 GROUT MATERIAL: ☒ Neat cement ☐ Cement grout ☐ Bentonite ☐ Other _____ Grout Intervals: From 0 ft. to 140 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft. Nearest source of possible contamination: ☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage ☐ Sewer Lines ☐ Cess Pool ☐ Sewage Lagoon ☐ Fuel Storage ☐ Abandoned Water Well ☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well ☐ Other (Specify) _____ Direction from well? _____ Distance from well? _____ ft.																																													
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:10%;">10 FROM</th> <th style="width:10%;">TO</th> <th style="width:40%;">LITHOLOGIC LOG</th> <th style="width:10%;">FROM</th> <th style="width:10%;">TO</th> <th style="width:20%;">LITHO. LOG (cont.) or PLUGGING INTERVALS</th> </tr> </thead> <tbody> <tr> <td>0</td> <td>10</td> <td>Silt</td> <td></td> <td></td> <td></td> </tr> <tr> <td>10</td> <td>90</td> <td>Silt, Clay, Sand</td> <td></td> <td></td> <td></td> </tr> <tr> <td>90</td> <td>100</td> <td>Clay/Weathered Shale</td> <td></td> <td></td> <td></td> </tr> <tr> <td>100</td> <td>350</td> <td>Shale, Dark Gray</td> <td></td> <td></td> <td></td> </tr> <tr> <td colspan="6" style="height: 40px; vertical-align: top;">Notes:</td> </tr> </tbody> </table>										10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS	0	10	Silt				10	90	Silt, Clay, Sand				90	100	Clay/Weathered Shale				100	350	Shale, Dark Gray				Notes:					
10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS																																								
0	10	Silt																																											
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90	100	Clay/Weathered Shale																																											
100	350	Shale, Dark Gray																																											
Notes:																																													
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was ☒ constructed, ☐ reconstructed, or ☐ plugged under my jurisdiction and was completed on (mo-day-year) 3/6/2020 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 791 This Water Well Record was completed on (mo-day-year) 4/22/2020 under the business name of TWO EIGHTY DRAINAGE, LLC Signature CLARK PAULS Mail 1 white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Environment, Bureau of Water, GWTS Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Mail one to Water Well Owner and retain one for your records. Telephone 785-296-5524. Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015																																													

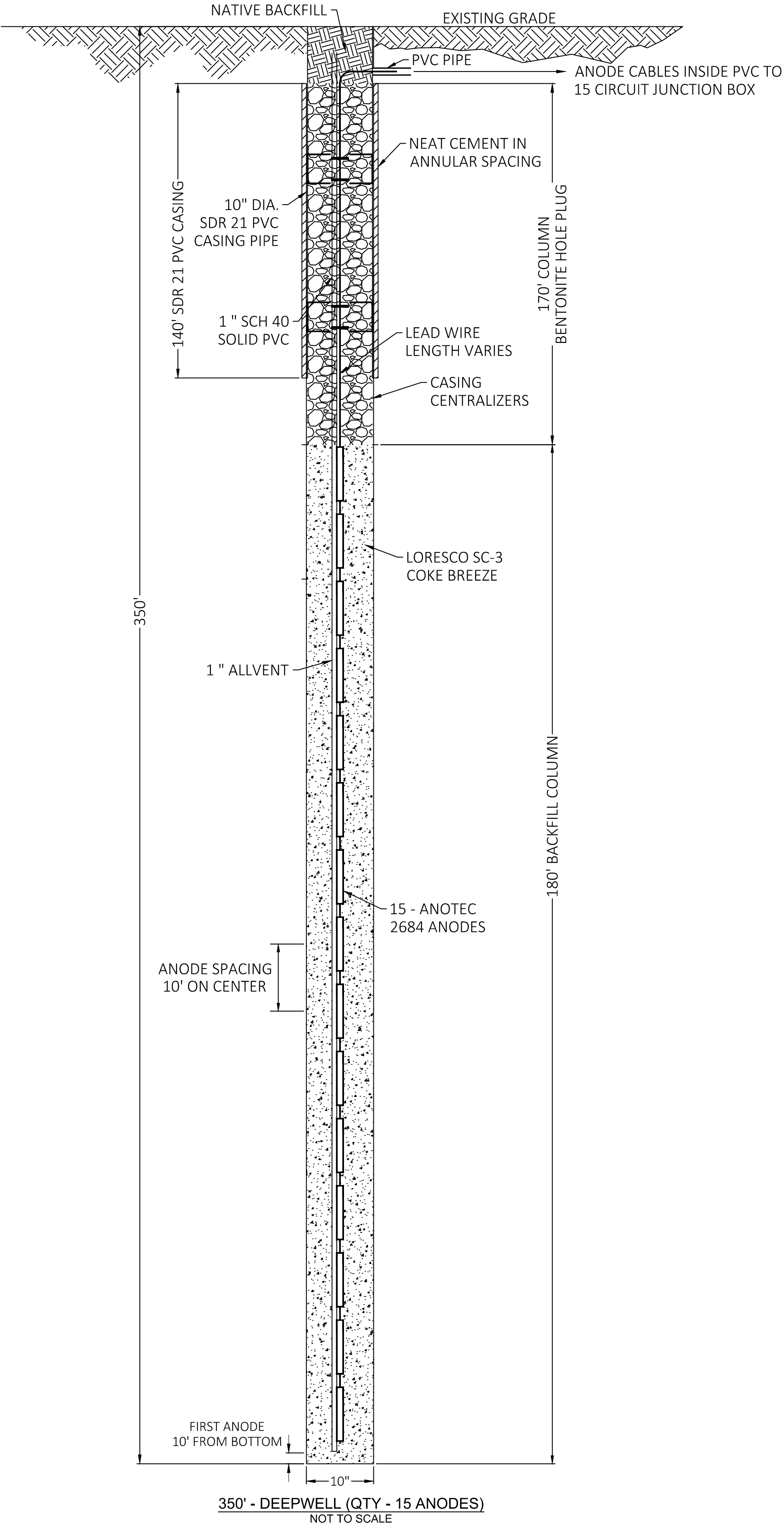


REVISIONS						Location:	Drawn by:		Date:		McCLURE™ ENERGY SOLUTIONS	MP 63.050 PRETTY PRAIRIE STATION MAGELLAN MIDSTREAM, L.P. DEEPWELL ANODES AS-BUILT		
No.	Description	Drawn By:	Date	Chk'd By:	Date		SEM		3/2020					
							Checked by:		Date:					
							JC		3/2020					
						KS					Work Order No. 191417-000		Sheet No. 1	Revision:

MATERIAL LIST		
MATERIAL	QUANTITY	UNIT
ANOTEC 2684 ANODES WITH INDIVIDUAL #8 HALAR LEADS	15	EA
DEEPWELL (37.824189, -98.045102)	1	EA
50V-50A UNIVERSAL RECTIFIER (37.824228, -98.045278)	1	EA
15 CIRCUIT JUNCTION BOX (37.824228, -98.045278)	1	EA
LORESCO SC-3 (50# BAG)	150	EA
BENTONITE HOLE PLUG (50# BAG)	65	EA
10" X 20' SDR 21 PVC CASING PIPE WITH 10" CAP (PER GMD 2 SPECIFICATIONS)	140	EA
NEAT CEMENT (CEMENT FOR ANNULAR SPACING PER GMD 2 SPECIFICATIONS)	9	YDS

LOGGING ANODE READINGS (LOGGED AT 12.5 DC VOLTS)

DEPTH	READING (OHMS)	DEPTH	READING (OHMS)
10	0.000	160	0.495
20	0.000	170	0.536
30	0.000	180	0.476
40	0.000	190	0.551
50	0.000	200	0.548
60	0.030	210	0.551
70	0.036	220	0.547
80	0.043	230	0.566
90	0.053	240	0.588
100	0.074	250	0.581
110	0.125	260	0.590
120	0.460	270	0.594
130	0.492	280	0.586
140	0.506	290	0.570
150	0.503	300	0.564



REVISIONS						Location:	Drawn by:	Date:	 McCLURETM ENERGY SOLUTIONS MP 63.050 PRETTY PRAIRIE STATION MAGELLAN MIDSTREAM, L.P. DEEPWELL ANODES AS-BUILT Work Order No. 191417-000 Sheet No. 2 Revision:
No.	Description	Drawn By:	Date	Chk'd By:	Date		SEM	3/2020	
							Checked by:	Date:	
							JC	3/2020	

JEFF WINTER, PRESIDENT
VIN KISSICK, VICE PRESIDENT
DAVID BOGNER, SECRETARY
MIKE MCGINN, TREASURER
TIM BOESE, MANAGER
THOMAS A. ADRIAN, ATTORNEY



DIRECTORS:
ALAN BURGHART
JOE PAJOR
DALE SCHMIDT
BOB SEILER
DAVID STROBERG

EQUUS BEDS GROUNDWATER MANAGEMENT DISTRICT NO. 2

313 SPRUCE STREET • HALSTEAD, KANSAS 67056-1925 • PHONE (316) 835-2224 • FAX (316) 835-2225 • equusbeds@gmd2.org • www.gmd2.org

February 3, 2020

Jon Cliff
McClure Energy Solutions
1700 Swift St.
North Kansas City, MO 64116

Re: Application No. CPB-102 – Magellan Pipeline Company LP

Dear Sir:

The Equus Beds Groundwater Management District No. 2 reviewed the referenced application, February 3, 2020, using the District's Revised Management Program (effective May 1, 1995) and Rules and Regulations K.A.R. 82-3-700, K.A.R. 82-3-705 through K.A.R. 82-3-710.

Based on the review, the application complied with the Cathodic Protection Regulations and the Revised Management Program and is hereby **approved** by the Equus Beds Groundwater Management District No. 2.

You must notify the District 72 hours before drilling and constructing the cathodic protection borehole.

Thank you for your cooperation and assistance in protecting our groundwater resources from contamination.

Sincerely,
EQUUS BEDS GROUNDWATER
MANAGEMENT DISTRICT NO. 2

Tim Boese
Manager
TDB/db
Enclosure

pc: Ryan Hoffman, Kansas Corporation Commission
Magellan Pipeline Company, Tulsa, OK

EQUUS BEDS GROUNDWATER MANAGEMENT DISTRICT NO. 2

313 Spruce Street
Halstead, Kansas 67056
Phone: (316) 835-2224 Fax: (316) 835-2225

FORM CP-10
APPLICATION FOR PERMIT TO DRILL AND CONSTRUCT
A CASED CATHODIC PROTECTION BOREHOLE
Referencing Kansas Corporation Commission Regulations
K.A.R. 82-3-700 through K.A.R. 82-3-710

Permit Application Number CPB - 102

To the Equus Beds Groundwater Management District No. 2:

Applicant: McClure Energy Solutions

Address: 1700 Swift St. North Kansas City Missouri 64116
(P.O. Box or Street) (City) (State) (Zip Code)

Telephone: (816) 502-3995
(Area Code) (Telephone)

Application to the Equus Beds Groundwater Management District No. 2 for a permit to drill and construct a cathodic protection borehole in and through the Equus Beds aquifer in the county of Reno, state of Kansas, to the extent and in the accordance with the following:

1. The location of the proposed cathodic protection borehole is in the NW quarter of the NW quarter of Section 1, Township 26 south, Range 7 west east, and more particularly described as being near a point 6465 feet north and 5118 feet west of the apparent southeast corner of said section.
2. The proposed use of the cathodic protection borehole is to provide cathodic protection of the applicant's Pipeline facility from electrochemical corrosion.
3. The land surface elevation is 1582 feet above mean sea level and the method of measurement used was (a) ☐ surveyed, (b) ☐ topographic map, or (c) ☒ other Google Earth.
4. The depth to surface or top of bedrock or shale is 120 feet below land surface (bls).
5. The depth to the water table of the fresh water aquifer is 35-40 feet bls.
6. Aquifer salinity as indicated by chloride concentration is 33 mg/L and was determined by: (a) ☐ published report, (b) ☒ test well data, or (c) ☐ other _____.
7. The total depth of the cathodic protection is 350 feet bls.
8. A non metallic surface casing equipped with centralizers will be installed in the surface casing borehole when drilling has penetrated 140 feet bls, which is a minimum of 20 feet below bedrock or shale surface as listed in paragraph #4.

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9. Casing centralizers will be installed on the surface casing beginning at the surface casing's total depth and at 40 feet intervals along the complete length of the surface casing at depths of 10, 50, 90, 130, _____, _____, _____, _____ feet bls.
10. The diameter of the surface casing borehole will be a minimum of six inches larger than the outside diameter of the surface casing. The diameter of the borehole containing the surface casing will be 16.75 inches and the outside diameter of the surface casing will be 10.75 inches.
11. The standard dimension ratio (SDR) of the surface casing calculated by dividing the surface casing's outside diameter (OD) of 10.75 inches by its minimum wall thickness (MWT) of .511 inches equals 21.
12. A pitless surface casing adapter will be installed in the surface casing 3.5 feet bls.
13. The annular space between the surface casing and the borehole will be grouted using: (a) ☐ cement, (b) ☐ neat cement, (c) ☒ bentonite clay grout, (d) ☐ bentonite cement, or (e) ☐ other _____ from a total surface casing depth of 0 feet bls to 140 feet bls.
14. The top of the surface casing will be fitted with a watertight cap and will: (a) ☐ terminate _____ feet above land surface, (b) ☐ terminate in a water resistant and structurally sound vault _____ feet bls, or (c) ☒ be buried 3 feet bls.
15. The anodes will be installed beginning at a depth of 190 feet bls to a total depth of 340 feet bls.
16. Anode conductor (backfill) material will be installed beginning at a depth of 180 feet bls to a total depth of 350 feet bls.
17. An anode vent pipe will be installed and completed 3 feet above land surface.
18. A concrete base or pad will / will not be constructed around the above ground surface casing or vault.
19. Will the use of a drilling pit threaten to contaminate fresh and usable groundwater?
☐ Yes ☒ No. If Yes, complete sections (a) and (b).
 - a. The pit will be: (i) ☐ constructed so that the bottom and sides have a hydraulic conductivity no greater than 1×10^{-7} cm/sec., (ii) ☐ constructed above ground, or (iii) ☒ a portable above ground tank, and
 - b. The applicant has submitted a surface pond application to the Director, Conservation Division, Kansas Corporation Commission. ☐ Yes ☒ No.
20. Has the applicant filed a completed Form KSONA-1 and plat map with this application? ☒ Yes ☐ No
21. Does the Form KSONA-1 indicate that the applicant has provided the surface owner with a copy of this application, including the Form KSONA-1 and plat map? ☒ Yes ☐ No.
22. A construction plan is submitted with the application and shows or illustrates the information contained in paragraphs #4 through #18.

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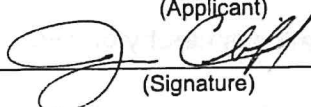
2

23. The cathodic protection borehole will be abandoned and plugged if it: (a) is not completed due to unforeseen circumstances, (b) either contaminates or threatens to contaminate a fresh water aquifer, (c) encounters uncontrollable artesian flow, (d) has exhausted its anodes and replacement anodes are not installed within one year, or (e) has not been used for one year and the applicant does not demonstrate intentions to use it.

24. The applicant understands and agrees to comply with K.A.R. 82-3-700 through 82-3-710. Further, the applicant may request an exception to these regulations pursuant to K.A.R. 82-3-100(b).

25. Dated at _____, Kansas, this 18TH day of December, 2019.

Jon Cliff

(Applicant)
By 
(Signature)
Project Manager

(Title)

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EQUUS BEDS GMD #2

APPLICANT DO NOT CONTINUE BELOW DOUBLE LINE

For Equus Beds Groundwater Management District #2 Use

1) Application received on 1 / 29 / 2020

2) Application reviewed by Tim Boese

Manager, GMD 2
(Title)

3) The application is hereby denied. The denial was based on the following findings:

4) The application meets or exceeds Cathodic Regulations K.A.R. 82-3-700 through K.A.R. 82-3-710 and is hereby approved by the Equus Beds Groundwater Management District No. 2 this 3rd day of February, 2020.

Tim Boese

Tim Boese, Manager
Equus Beds Groundwater Management District No. 2

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EQUUS BEDS GMD #2

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

**CERTIFICATION OF COMPLIANCE WITH THE
KANSAS SURFACE OWNER NOTIFICATION ACT**

Form KSONA-1
July 2014
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)
GMD2 CP-10

OPERATOR: License # 33883
Name: Magellan Pipeline Company LP
Address 1: 1 Williams CTR OTC-9
Address 2:
City: Tulsa State: OK Zip: 74172
Contact Person: Tyler Kraus
Phone: (913) 523-4587 Fax: ()
Email Address: Tyler.Kraus@magellanlp.com

Well Location:
NW NW NW NW Sec. 1 Twp. 26 S. R. 7 ☐ East ☒ West
County: Reno
Lease Name: Pretty Prairie Well MP 63.050 Well #: 1

If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:

Surface Owner Information:

Name: Magellan Midstream Partners
Address 1: Pretty Prairie Station
Address 2: 1 Williams CTR OTC-9
City: Tulsa State: OK Zip: 74172

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 (House Bill 2032), 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 hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date: 12/18/19 Signature of Operator or Agent: *[Signature]* Title: Project Manager

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For KCC Use ONLY

API # 15 - _____

IN ALL CASES, PLEASE FULLY COMPLETE THIS SIDE OF THE FORM.

In all cases, please fully complete this side of the form. Include items 1 through 3 at the bottom of this page.

Operator: Magellan Pipeline Company LP
 Facility Name: Pretty Prairie MP 63.050
 Borehole Number: 1

Location of Well: County: Reno
6,485 feet from ☐ N / ☒ S Line of Section
5,118 feet from ☒ E / ☐ W Line of Section
 Sec. 1 Twp. 26 S. R. 7 ☐ E ☒ W

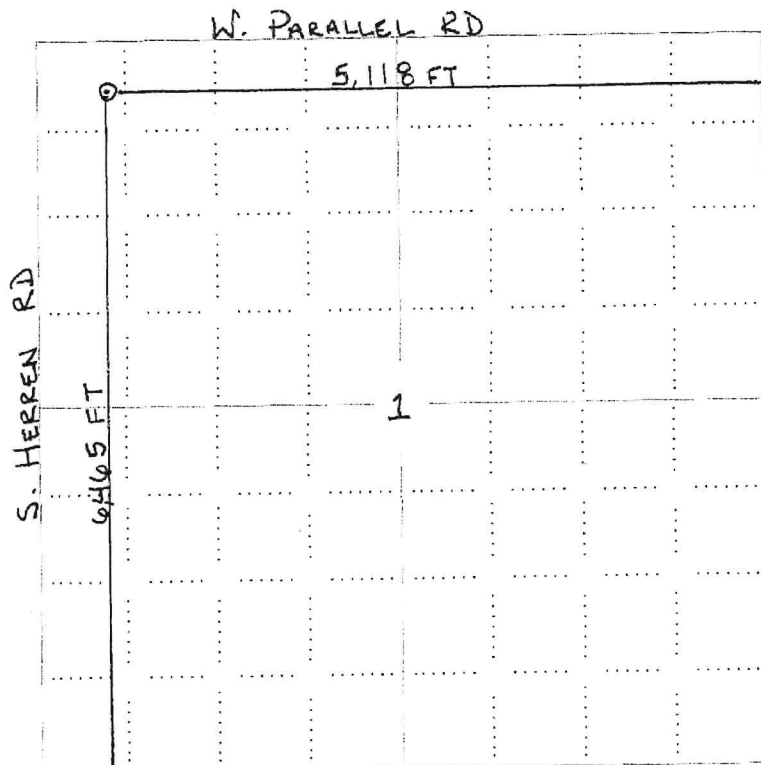
Is Section: ☒ Regular or ☐ Irregular

If Section is Irregular, locate well from nearest corner boundary.

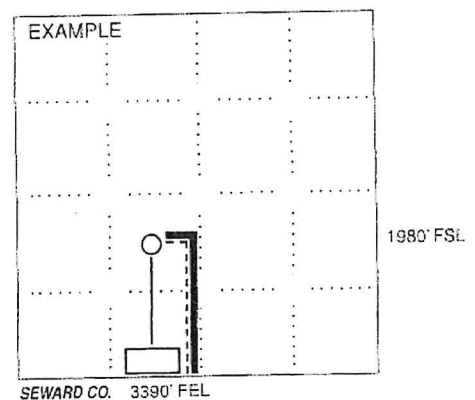
Section corner used: ☐ NE ☐ NW ☐ SE ☐ SW

PLAT

Show location of the Cathodic Borehole. Show footage to the nearest lease or unit boundary line. Show the predicted locations of lease roads, tank batteries, pipelines and electrical lines, as required by the Kansas Surface Owner Notice Act (House Bill 2032).
 You may attach a separate plat if desired.

**LEGEND**

- ☐ Well Location
- ☐ Tank Battery Location
- ☐ Pipeline Location
- ☐ Electric Line Location
- ☐ Lease Road Location



NOTE: In all cases locate the spot of the proposed drilling location.

In plotting the proposed location of the well, you must show:

- The manner in which you are using the depicted plat by identifying section lines, i.e. 1 section, 1 section with 8 surrounding sections, 4 sections, etc.;
- The distance of the proposed drilling location from the section's south / north and east / west; line.
- The predicted locations of lease roads, tank batteries, pipelines, and electrical lines.

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EQUUS BEDS GMD #2

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
APPLICATION FOR SURFACE PIT

Form CDP-1
July 2014
Form must be Typed

Submit in Duplicate

Operator Name: Magellan Pipeline Company, LP		License Number: 33883	
Operator Address: 1 Williams CTR OTC-9			
Contact Person: Tyler Kraus		Phone Number: 913-523-4587	
Lease Name & Well No.: Chase CO MP 63.050		Pit Location (QQQQ): NW - NW - NW - NW Sec. 1 Twp. 26 R. 7 ☐ East ☐ West 6,465 Feet from ☐ North / ☒ South Line of Section 5,118 Feet from ☒ East / ☐ West Line of Section Reno County	
Type of Pit: ☐ Emergency Pit ☐ Burn Pit ☐ Settling Pit ☐ Drilling Pit ☐ Workover Pit ☐ Haul-Off Pit (If WP Supply API No. or Year Drilled) Steel Pit	Pit is: ☒ Proposed ☐ Existing If Existing, date constructed: Pit capacity: (bbls)		
Is the pit located in a Sensitive Ground Water Area? ☒ Yes ☐ No		Chloride concentration: mg/l (For Emergency Pits and Settling Pits only)	
Is the bottom below ground level? ☐ Yes ☒ No		Artificial Liner? ☐ Yes ☐ No	
Pit dimensions (all but working pits): Length (feet) Width (feet) Depth from ground level to deepest point: (feet)		☒ N/A: Steel Pits ☐ No Pit	
If the pit is lined give a brief description of the liner material, thickness and installation procedure. Steel Pit/Portable Pit - Mud Puppy		Describe procedures for periodic maintenance and determining liner integrity, including any special monitoring. Steel Pit/Portable Pit - Mud Puppy	
Distance to nearest water well within one-mile of pit: feet Depth of water well feet		Depth to shallowest fresh water feet. Source of information: ☐ measured ☐ well owner ☐ electric log ☐ KDWR	
Emergency, Settling and Burn Pits ONLY: Producing Formation: Number of producing wells on lease: Barrels of fluid produced daily: Does the slope from the tank battery allow all spilled fluids to flow into the pit? ☐ Yes ☐ No		Drilling, Workover and Haul-Off Pits ONLY: Type of material utilized in drilling/workover: Number of working pits to be utilized: Abandonment procedure: Drill pits must be closed within 365 days of spud date.	
I hereby certify that the above statements are true and correct to the best of my knowledge and belief. 12/18/19 Date Signature of Applicant or Agent RECEIVED JAN 29 2020 EQUUS BEDS GMD #2			

KCC OFFICE USE ONLY

☐ Liner ☐ Steel Pit ☐ RFAC ☐ RFAS

Date Received: Permit Number: Permit Date: Lease Inspection: ☐ Yes ☐ No

Mail to: KCC - Conservation Division, 266 N Main St, Ste 220, Wichita, KS 67202-1513

NATIVE SOIL

EXISTING GRADE

PVC PIPE

ANODE CABLES INSIDE PVC TO JUNCTION BOX. VENT PIPE TO TERMINATE AT J-BOX/RECTIFIER 3' ABOVE SURFACE.

BENTONITE INSIDE CASING PIPE

140' SDR 21 PVC CASING (BEDROCK DEPTH = 120')

10" DIA. SDR 21 PVC CASING PIPE

180' BENTONITE BACKFILL FROM TOP OF COKE COLUMN TO TOP OF CASING

CASING CENTRALIZERS

TOP OF COKE COLUMN

INDIVIDUAL ANODE LEAD WIRES LENGTH VARIES

ANODES ATTACHED TO VENT PIPE

1" VENT PIPE

170' ACTIVE COKE COLUMN

COKE BREEZE BACKFILL

ANODE SPACING 10' CTRS.

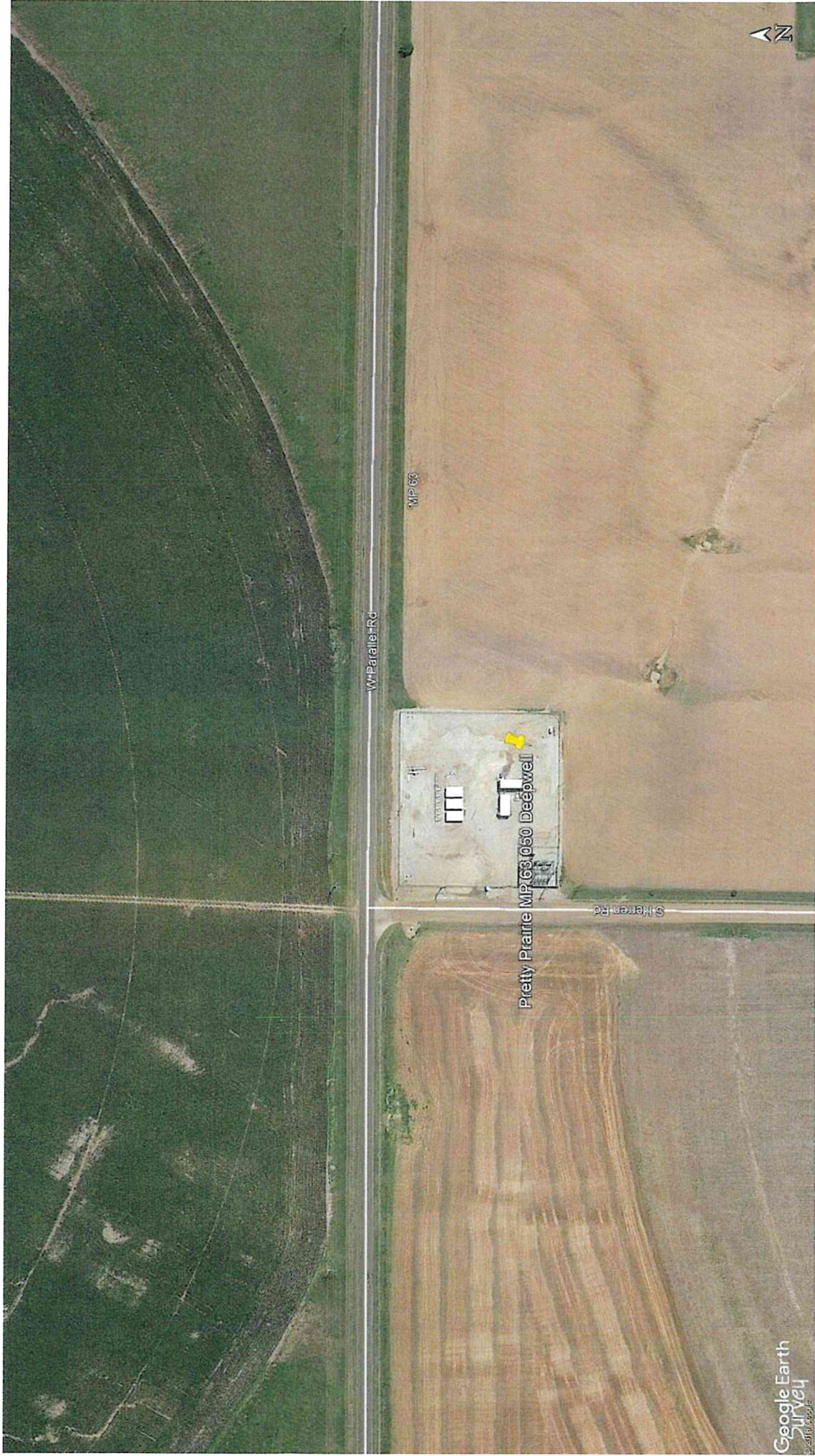
FIRST ANODE 10' FROM BOTTOM

10' MIN

10"

350'

EQUUS BEDS GMD #2



Google Earth
Survey
2010-2011

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EQUUS BEDS GMD #2