KOLAR Document ID: 1871451

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 #: 3532
Name: CMX, Inc.
Address 1: 1635 N WATERFRONT PKWY STE 220
Address 2:
City: WICHITA State: KS Zip: 67206 + 6630
Contact Person: Douglas McGinness
Phone: (316) 269-9052

API No. 15 - 15-007-22789-00-00
If pre 1967, supply original completion date:
Spot Description:
__ - __ - __ - SW Sec. 12 Twp. 35 S. R. 14 ☐ East ☑ West
1313 Feet from ☐ North / ☑ South Line of Section
3916 Feet from ☑ East / ☐ West Line of Section
Footages Calculated from Nearest Outside Section Corner:
☐ NE ☐ NW ☑ SE ☐ SW
County: Barber
Lease Name: DAVID STRAWN Well #: 1

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: 8.625 Set at: 377 Cemented with: 265 Sacks
Production Casing Size: 4.5 Set at: 4999 Cemented with: 315 Sacks

List *(ALL)* Perforations and Bridge Plug Sets:
Attached

Elevation: 1582 (☑ G.L. / ☐ K.B.) T.D.: 5000 PBTD: 4970 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)*:
As per KCC instruction

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: Keith Bright
Address: 1635 N Waterfront Pkwy Suite 220 City: Wichita State: KS Zip: 67206 + __ __ __ __
Phone: (316) 239-8593
Plugging Contractor License #: 5105 Name: Clarke Corporation
Address 1: 107 W FOWLER AVE Address 2:
City: MEDICINE LODGE State: KS Zip: 67104 + 1534 __
Phone: (620) 886-5665
Proposed Date of Plugging *(if known)*: 12/12/2025

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 # 3532
Name: CMX, Inc.
Address 1: 1635 N WATERFRONT PKWY STE 220
Address 2:
City: WICHITA State: KS Zip: 67206 + 6630
Contact Person: Douglas McGinness
Phone: (316) 269-9052 Fax: ( )
Email Address:

Well Location:
__ - __ - __ - SW Sec. 12 Twp. 35 S. R. 14 ☐ East ☒ West
County: Barber
Lease Name: DAVID STRAWN 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: David Strawn
Address 1: PO Box 240
Address 2:
City: Alva State: OK Zip: 73717 + __ __ __ __

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.

Submitted Electronically

Form	CP1 - Well Plugging Application
Operator	CMX, Inc.
Well Name	DAVID STRAWN 1
Doc ID	1871451

Perforations And Bridge Plug Sets

Perforation Top	Perforation Base	Formation	Bridge Plug Depth
4886	4920		

Additional Surface Owners David-Strawn Well

C. Harris McCracken
38309 County Road 390
Alva, OK 73717

Brad McCracken
40939 Nobel Road
Alva, OK 73717

Mike McCracken
39268 McClain Road
Alva, OK 73717

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

Kansas
Corporation Commission

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

December 08, 2025

Douglas McGinness
CMX, Inc.
1635 N WATERFRONT PKWY STE 220
WICHITA, KS 67206-6630

Re: Plugging Application
API 15-007-22789-00-00
DAVID STRAWN 1
SW/4 Sec.12-35S-14W
Barber County, Kansas

Dear Douglas McGinness:

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 June 06, 2026. 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 June 06, 2026 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