

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.: _____ P.B.T.D.: _____ 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

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STATION Cottman OPERATOR Ken Jones

CONSOLIDATED OIL WELL SERVICES, INC.

P.O. Box 884
Chanute, Kansas 66720
Phone (316) 431-9210

Ticket 87532

Date <u>6/18/91</u>	Customer's Acct. No. <u>1421</u>	Sec. <u>11</u>	Twp. <u>17</u>	Range <u>24</u>	Well No. & Farm <u>445W1 Good</u>	Place or Destination <u>Louisburg</u>
Charge To <u>Bobcat Oil Field Svc.</u>	Owner <u>1/2 Bob Eberhart</u>				County <u>MT.</u>	
Mailing Address <u>1947 Sheridan Bridge</u>	Contractor <u>Town Oil Co.</u>				State <u>Ks.</u>	
City & State <u>Olathe, Ks. 66062</u>	Well Owner Operator Contractor					

CEMENTING SERVICE DATA

TYPE OF JOB	CASING	HOLE DATA	PLUGS AND HEAD	PRESSURE	CEMENT LEFT IN CASING
Surface	New	Bore Size <u>6 7/8"</u>	Bottom	Circulating <u>100</u>	Requested
Production	Used	Total Depth <u>927'</u>	Top	Minimum	Necessity
Squeeze	Size <u>4 1/2"</u>	Cable Tool	Head <u>BU+SWJ</u>	Maximum <u>100</u>	Measured
Pumping	Weight	Rotary	Float Equipment	Sacks Cement <u>122</u>	
Other	Depth <u>920'</u>		Type & Brand <u>Portland A-1 403 Per</u>		
	Type <u>SRD</u>		Admixes <u>276 Gal</u>		

FRACTURING - ACIDIZING SERVICE DATA

Type of Job	At Intervals of				
Bbls Fracturing Fluid	Breakdown Pressure from	psi to	psi		
Treating Pressures: Maximum	psi	Minimum	psi	Avg. Pump Rate	GPM/BPM
Sand	Gals. Treating Acid	Type	Open Hole Diameter		
Well Treating Through: Tubing	Casing	Annulus	Size	Weight	
Remarks:					
No. Perforations	Pay Formation Name	Depth of Job			Ft.

CEMENTING Cement One Well

INVOICE SECTION

FRACTURING - ACIDIZING

Pumping Charge	Office \$	Pumping Charge	Office \$
Pumping Charge @	Use \$ <u>381.00</u>	Pumping Charge @	Use \$
<u>122</u> Sacks Bulk Cement	<u>640.50</u>	12x30 Sand	
Ton Mileage on Bulk Cement <u>35</u>	<u>60.00</u>	10x20 Sand	
<u>5</u> Premium Gel	<u>34.50</u>	x Sand	
Flo-Seal		Ton Mileage	
Calcium Chloride		Gals. Acid	
Plug		Chemicals	
Equipment		Potassium Chloride	
<u>3 gal. 2 Head (see above)</u>		Rock Salt	
		Water Gel	
Granulated Salt		Transport Truck (Hrs.)	
Transport Truck (Hrs.)		Vac Truck (Hrs.)	
Vac Truck (<u>3</u> Hrs.)	<u>132.00</u>		
Tax	<u>35.44</u>	Tax	
Total	<u>\$1,283.44</u>	Total	\$

A Finance Charge computed at 1% per month (annual percentage rate of 21%) will be added to balance over 30 days.

1991



CEMENTING WORK ORDER

Call Back to Confirm
time & on water tank

CONSOLIDATED OIL WELL SERVICES, INC.

Phone (316) 431-9210

Chanute, Kansas 66720

J.G.

Day Tues
Date 6 / 17 / 9:00 to 5:00
MONTH DAY TIME

NAME OF CUSTOMER

Bob C. Oil

LEASE #

Good

WELL #

WSW 1

JOB DESCRIPTION

cmr60% for 20% off122 sk.5 sk. GEL.3 hr. Vae.

Displace within 50' of Bottom
4 1/2 open ended

PIPE SIZE

4 1/2

SIZE OF HOLE

6 1/4

DEPTH OF WELL

925'

TYPE OF RIG:

☐ AIR☐ MUD

AMT. OF CEMENT NEEDED

% OF GEL NEEDED

MATERIALS

TYPE OF TRUCK:

☐ VAC☐ TRANSPORT

LOCATION OF JOB

503 + Pleasant Valley1/2 N

ORDER TAKEN BY

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

June 15, 2026

Rob Eberhart
Bobcat Oilfield Service, Inc.
602 W AMITY SUITE 103
LOUISBURG, KS 66053-3542

Re: Plugging Application
API 15-121-27154-00-00
GOOD WSW-1
SE/4 Sec.11-17S-24E
Miami County, Kansas

Dear Rob Eberhart:

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

Under K.A.R. 82-3-113(b)(2), you must notify DISTRICT 3 of your proposed plugging plan at least 5 days before plugging the well. DISTRICT 3's phone number is (620) 902-6450. Failure to notify DISTRICT 3, 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 12, 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 December 12, 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 3