KOLAR Document ID: 1981693

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 #: 34357
Name: Atlas Operating LLC
Address 1: 1900 ST JAMES PLACE SUITE 800
Address 2:
City: HOUSTON State: TX Zip: 77056 + 4133
Contact Person: Zafar Ullah
Phone: (281) 893-9400

API No. 15 - 15-095-00309-00-00
If pre 1967, supply original completion date: 1952
Spot Description:
_ - SE - SW - SW Sec. 23 Twp. 30 S. R. 8 ☐ East ☑ West
330 Feet from ☐ North / ☑ South Line of Section
990 Feet from ☐ East / ☑ West Line of Section
Footages Calculated from Nearest Outside Section Corner:
☐ NE ☐ NW ☐ SE ☑ SW
County: Kingman
Lease Name: BOYLE R (WSU 33 1) Well #: 2

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: 204 Cemented with: 100 Sacks
Production Casing Size: 5.5 Set at: 4665 Cemented with: 200 Sacks

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

Elevation: 1599 (☑ G.L. / ☐ K.B.) T.D.: 4685 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)*:
Move in rig up Quality well service unit. Pull out rods and tubing
set cibp at 4320. dump 2 sks cmt on top of plug
Perforate at 1250,750 ang250.
Pump 35 sks cement at 1250 . woc Tag. pump 35 sks at 750'.. Pull up to 250 and circ 100 sks to surface.
cut casing 4' below ground. empty pit . backfill pit and cellar.
Move off Quality well service

Is Well Log attached to this application? ☐ Yes ☐ No Is ACO-1 filed? ☐ Yes ☑ No

If ACO-1 not filed, explain why:
well drilled in 1952

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: Johnny Allen
Address: 300 W Stanley Hwy 42 City: Spivey State: Kansas Zip: 67124 +
Phone: (620) 213-0362
Plugging Contractor License #: 31925 Name: Quality Well Service, Inc.
Address 1: PO BOX 468 Address 2:
City: PRATT State: KS Zip: 67124 + 0468
Phone: (620) 727-6964

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: 1981693

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 # 34357
Name: Atlas Operating LLC
Address 1: 1900 ST JAMES PLACE SUITE 800
Address 2:
City: HOUSTON State: TX Zip: 77056 + 4133
Contact Person: Zafar Ullah
Phone: (281) 893-9400 Fax: (940) 893-7629
Email Address: zafar@atlasoperating.com

Well Location:
__ - SE - SW - SW Sec. 23 Twp. 30 S. R. 8 ☐ East ☒ West
County: Kingman
Lease Name: BOYLE R (WSU 33 1) Well #: 2

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

Surface Owner Information:
Name: Joho, LLC
Address 1: 525 S Main
Address 2:
City: Kingman State: Kansas Zip: 67068 + __ __ __ __

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	Atlas Operating LLC
Well Name	BOYLE R (WSU 33 1) 2
Doc ID	1981693

Perforations And Bridge Plug Sets

Perforation Top	Perforation Base	Formation	Bridge Plug Depth
4370	4378	Mississippi	

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

September 08, 2026

Zafar Ullah
Atlas Operating LLC
1900 ST JAMES PLACE SUITE 800
HOUSTON, TX 77056-4133

Re: Plugging Application
API 15-095-00309-00-00
BOYLE R (WSU 33 1) 2
SW/4 Sec.23-30S-08W
Kingman County, Kansas

Dear Zafar Ullah:

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 March 07, 2027. 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 March 07, 2027 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