

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL PLUGGING APPLICATION
Please TYPE Form and File ONE Copy

Form CP-1
March 2009
This Form must be Typed
Form must be Signed
All blanks must be Filled

OPERATOR: License #: 33409
Name: Cal Jones Producer (Charles Jones)
Address 1: 2504 Meridian
Address 2: _____
City: Canton State: Ks Zip: 67428 + _____
Contact Person: Charles Jones
Phone: (620) 628-4731

API No. 15 - 113-20805 - 0000
If pre 1967, supply original completion date: _____
Spot Description: _____
nw 5/8 sec Sec. 36 Twp. 18 S. R. 1 East West
1650 1660 Feet from North / South Line of Section
380 623 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner: per GPS
 NE NW SE SW
County: McPherson
Lease Name: Jones Well #: 5

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 5/8" Set at: 136' Cemented with: 100 Sacks
Production Casing Size: 5 1/2" Set at: 3347' Cemented with: 140 Sacks

List (ALL) Perforations and Bridge Plug Sets:
Perforations 3276' to 3281 20' Holes 2811' to 2817' 24 Holes Bridgeplug Sets 2900'

Elevation: 1495 (G.L. / K.B.) T.D.: 3347' PBTD: 2900 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):

According to the rules of the State of Kansas

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

If ACO-1 not filed, explain why:

RECEIVED
MAY 28 2009
KCC WICHITA

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: Charles Jones
Address: 2504 Meridian City: Canton State: Ks Zip: 67428 + _____
Phone: (620) 628-4731
Plugging Contractor License #: 31529 Name: Mike's Testing & Salvage Inc.
Address 1: P.O. Box 467 Address 2: _____
City: Chase State: Ks Zip: 67524 + _____
Phone: (620) 938-2943
Proposed Date of Plugging (if known): ASAP

Payment of the Plugging Fee (K.A.R. 82-3-118) will be guaranteed by Operator or Agent
Date: 05/27-2009 Authorized Operator / Agent: Charles Jones (Signature)

Dist 2
PPT



CORPORATION COMMISSION

Mark Parkinson, Governor Thomas E. Wright, Chairman Michael C. Moffet, Commissioner Joseph F. Harkins, Commissioner

NOTICE OF RECEIPT OF WELL PLUGGING APPLICATION (CP-1)

JONES, CHARLES
2504 MERIDIAN
CANTON, KS 67428-6000

June 04, 2009

Re: JONES #5
API 15-113-20805-00-00
36-18S-1W, 1660 FSL 623 FEL
MCPHERSON COUNTY, KANSAS

Dear Operator:

This letter is to notify you that the Conservation Division has received your plugging proposal, form CP-1, for the above well and has reviewed the proposal for completeness. The central office will now forward your CP-1 to the district office listed below for review of the proposed plugging method. **Please contact the district office for approval of your proposed plugging method at least five (5) days before plugging the well, pursuant to K.A.R. 82-3-113(b). If a workover pit will be used during the plugging of the well it must be permitted. A CDP-1 form must be filed and approved prior to the use of the pit in accordance with K.A.R. 82-3-600.**

The Conservation Division's review of form CP-1, either in the central or district office, does not include an inquiry into well ownership or the filing operator's legal right to plug the well. This notice in no way constitutes authorization to plug the above well by persons not having legal rights of ownership or interest in the well.

This notice is void after December 1, 2009. The CP-1 filing does not bring the above well into compliance with K.A.R. 82-3-111 with regard to the Commission's temporary abandonment requirements.

Sincerely,

Steve Bond
Production Department Supervisor

District: #2
3450 N. Rock Road, Suite 601
Wichita, KS 67226
(316) 630-4000