

**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: 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 - 113-00247 -0000
If pre 1967, supply original completion date: _____
Spot Description: _____
W2 NW SE SE Sec. 36 Twp. 18 S. R. 1 East West **KCC PKT OPS**
1,040 Feet from North South Line of Section
1,156 Feet from East West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: McPherson
Lease Name: Jones 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 5/8" Set at: 169' Cemented with: 115 SX Sacks
Production Casing Size: 5 1/2" Set at: 2832' Cemented with: 50 SX Sacks

List (ALL) Perforations and Bridge Plug Sets:

Elevation: 1482 (G.L. / K.B.) T.D.: _____ PBTD: _____ Anhydrite Depth: _____
(Stone Corral Formation)

Condition of Well: Good Poor Junk in Hole Casing Leak at: Not Known
(Interval)

Proposed Method of Plugging (attach a separate page if additional space is needed):

Whatever the State approves.

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

If ACO-1 not filed, explain why:

**RECEIVED
KANSAS CORPORATION COMMISSION
SEP 21 2009
CONSERVATION DIVISION
WICHITA, KS**

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 #: KLN 30280 Name: Sunflower Well Service
Address 1: 408 N. 4th Street Address 2: P.O. Box 341
City: Canton State: Ks. Zip: 67428 + _____
Phone: (620) 628-4732

Proposed Date of Plugging (if known): _____

Payment of the Plugging Fee (K.A.R. 82-3-118) will be guaranteed by Operator or Agent

Date: 09/17/2009 Authorized Operator / Agent: Charles Jones
(Signature)

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

Dist 2 PKT



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

September 28, 2009

Re: JONES #2
API 15-113-00247-00-00
36-18S-1W, 1040 FSL 1156 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 March 27, 2010. 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