



KANSAS CORPORATION COMMISSION 1033164
OIL & GAS CONSERVATION DIVISION

Form CP-1
March 2009

This Form must be Typed
Form must be Signed
All blanks must be Filled

WELL PLUGGING APPLICATION

Please TYPE Form and File ONE Copy

OPERATOR: License #: 3372
Name: Dixon Energy, Inc.
Address 1: 8100 E 22ND N BLDG 300, Ste 200
Address 2: _____
City: WICHITA State: KS Zip: 67226 + _____
Contact Person: Mike Dixon
Phone: (316) 264-9632

API No. ~~15~~ - 15-007-21551-00-00
If pre 1967, supply original completion date: _____
Spot Description: _____
N2-SE SE SE Sec. 16 Twp. 32 S. R. 12 East West
490 Feet from North / South Line of Section
330 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Barber
Lease Name: LONKER F 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: 8.6250 Set at: 407 Cemented with: 350 Sacks
Production Casing Size: 4.5 Set at: 4827 Cemented with: 150 Sacks

List (ALL) Perforations and Bridge Plug Sets:

Attached

Elevation: 1535 (G.L. / K.B.) T.D.: 4830 PBDT: 4813 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):

Per KCC Rules and Regulations

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

If ACO-1 not filed, explain why:

not available- Not in old well file

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NOV 20 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: Mike Dixon

Address: 8100 E 22ND N BLDG 300, Ste 200 City: Wichita State: KS Zip: 67226 + _____

Phone: (316) 264-9632

Plugging Contractor License #: 5105 Name: Clarke Corporation

Address 1: 107 W FOWLER Address 2: _____

City: MEDICINE LODGE State: KS Zip: 67104 + 1534

Phone: (620) 886-5665

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

*Dist 1
PKT*

Form	CP1 - Well Plugging Application
Operator	Dixon Energy, Inc.
Well Name	LONKER F 1
Doc ID	1033164

Perforations And Bridge Plug Sets

Perforation Top	Perforation Base	Formation	Bridge Plug Depth
4736	4746		

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Operator	Dixon Energy, Inc.
Well Name	LONKER F 1
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Perforations And Bridge Plug Sets

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4736	4746		

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

November 20, 2009

Mike Dixon
Dixon Energy, Inc.
8100 E 22ND N BLDG 300, Ste 200
WICHITA, KS 67226

Re: Plugging Application
API 15-007-21551-00-00
LONKER F 1
SE/4 Sec.16-32S-12W
Barber County, Kansas

Dear Mike Dixon:

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 May 19, 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,
Production Department Supervisor

cc: District 1

(620) 225-8888

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