### 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 #: _31431	moor be dubinities with	API No. 1815	-195-20237	<u>'</u> 200-01	
Name: Barton Exploration, Inc.	If pre 1967, supply original completion date: 1-18-73				
Address 1: 3017 E. 14th St.		Spot Description: _			
		C_NW_NE_	Sec. 23 Twp	13 S. R. 22	East   ✓ West
Address 2:	4,620 Feet from North / South Line of Section 1,980 Feet from Feet from East / West Line of Section				
City: Hays State: Ks.					
Contact Person: Lonnie Barton		Footages Calculate	ed from Nearest C	Outside Section Corr	ner:
Phone: (785 ) 483-9136		☐ NE	NW S	SE SW	
		County: Trego			
	· • • • • • • • • • • • • • • • • • • •	Lease Name: Ho	Mana	Well #: B-1	<u> </u>
Check One: ✓ Oii Well Gas Well OG	D&A Cathodic	: Water Supply V	Vell Othe	er:	
SWD Permit#:	ENHR Permit#:			ermit #:	
	Set at:		•		
Surface Casing Size: 8 5/8			d with: 200		Sacks
Production Casing Size: 4 1/2			d with: 175		Sacks
List (ALL) Perforations and Bridge Plug Sets:					
3659 3697 3804 4 1/2 production	n packer stuck at ap	prox. 3400			
•	•				
Elevation: 2278 ( GL/  KB) T.D.: 4147	DRTD: Ar	hwdrita Danth			
				e Corral Formation)	
Condition of Well: Good Poor Junk in Hole	Casing Leak at: DaKOT	d eterval)			
Proposed Method of Plugging (attach a separate page if addition	nal space is needed):				
Is Well Log attached to this application? Yes V 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. seg. and the Rule	es and Regulations of	the State Corpor	ation Commission	
Company Representative authorized to supervise plugging of			<i>b</i> .	(2/11	
	City: _	Hays	_ State:	Zip: 6 /60/	_+
Phone: (785) 483 9/36	-				
Plugging Contractor License #.	Name	e:			
Address 1:	Addre	ss 2:			
City:			_ State:	Zip:	_+
Phone: ()	<u> </u>				•
Proposed Date of Plugging (if known): 7-1	9-10				
		•		REC	EIVED
Payment of the Plugging Fee (K.A.R. 82-3-118) will be gue					
Date: 7-14-10 Authorized Operator / Agent	t_Sonnie Da		nature)	JUL	1 5 2019



Mark Parkinson, Governor Thomas E. Wright, Chairman, Joseph F. Harkins, Commissioner, Ward Loyd, Commissioner

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

BARTON EXPLORATION, INC. 3017 E 14TH ST HAYS, KS 67601-2790

July 15, 2010

Re: HOLLAND B #1

API 15-195-20237-00-01

23-13S-22W, 4620 FSL 1980 FEL TREGO 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 January 11, 2011. 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: #4 2301 E. 13th Hays, KS 67601

(785) 625-0550

# KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form KSONA-1
July 2010
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 (Tr.	ansfer) X CP-1 (Plugging Application)
OPERATOR: License #	Well Location:	
Name: Barton Exploration, Inc.		. 13 S. R. 22 East  West
Address 1: 3017 E. 14th St.		
Address 2:	County: I rego Lease Name: Holland	Well #: _B1
City: Hays State: Ks. zip: 67601 + Contact Person: Lonnie Barton	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:	
Phone: ( 785 ) 483-9136 Fax: ( )		•
Email Address: lonandmel@eaglecom.net		
Surface Owner Information: Name: Delmar Dietz	When filing a Form T-1 involving multip	ole surface owners, attach an additional ne left for each surface owner. Surface
Address 1: 23062 310 Ave.	owner information can be found in the	records of the register of deeds for the
Address 2:	county, and in the real estate property tax records of the county treasure	
City: Ogallah State: Ks. Zip: 67656 +		
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathothe KCC with a plat showing the predicted locations of lease roads, tank are preliminary non-binding estimates. The locations may be entered of Select one of the following:  I certify that, pursuant to the Kansas Surface Owner Notice A owner(s) of the land upon which the subject well is or will be I CP-1 that I am filling in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax, a	k batteries, pipelines, and electrical line in the Form C-1 plat, Form CB-1 plat, or Act (House Bill 2032), I have provided ocated: 1) a copy of the Form C-1, For being filed is a Form C-1 or Form CB-1	s. The locations shown on the plat r a separate plat may be submitted. the following to the surface rm CB-1, Form T-1, or Form
I have not provided this information to the surface owner(s). I a KCC will be required to send this information to the surface ov task, I acknowledge that I am being charged a \$30.00 handling	vner(s). To mitigate the additional cost	t of the KCC performing this
If choosing the second option, submit payment of the \$30.00 handling form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-	fee with this form. If the fee is not rec 1 will be returned.	eived with this form, the KSONA-1
I hereby certify that the statements made herein are true and correct to	the best of my knowledge and belief.	Proper son
Date: 7-14-10 Signature of Operator or Agent: Son	na Warton Title: As	gent RECEIVED
		JUL 1 5 2010