

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 #: 34225
Name: Buffalo Resources, LLC
Address 1: 301 Commerce Street, Suite 1380
Address 2: _____
City: Fort Worth State: TX Zip: 76102 + _____
Contact Person: Matthew Flanery
Phone: (817) 870-2707

API No. 15 - 167-23644-0000
If pre 1967, supply original completion date: _____
Spot Description: _____
NE SW SE NW Sec. 6 Twp. 14 S. R. 11 East West
2,220 Feet from North / South Line of Section
1,800 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Russell
Lease Name: Stricker Well #: 2-6

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: 518 Cemented with: 250 Sacks
Production Casing Size: _____ Set at: _____ Cemented with: _____ Sacks

List (ALL) Perforations and Bridge Plug Sets:

Elevation: 1815 (G.L. / K.B.) T.D.: 3333 PBTD: _____ Anhydrite Depth: 675
(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):

Is Well Log attached to this application? Yes 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. seq. and the Rules and Regulations of the State Corporation Commission

Company Representative authorized to supervise plugging operations: Daron Patterson

Address: 301 Commerce Street, Suite 1380 City: Fort Worth State: TX Zip: 76102 + _____

Phone: (817) 870-2707

Plugging Contractor License #: 5929 Name: Duke Drilling Co.

Address 1: P.O. Box 823 Address 2: _____

City: Great Bend State: KS Zip: 67530 + _____

Phone: (620) 793-8366

Proposed Date of Plugging (if known): 6/29/2010

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

Date: 7/9/2010 Authorized Operator / Agent: *Mark Foley*
(Signature)

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

RECEIVED

AUG 02 2010

KCC WICHITA

Dist. 4

Alr. Plugged No ltr.

law

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 (Transfer) CP-1 (Plugging Application)

OPERATOR: License # 34225
Name: Buffalo Resources, LLC
Address 1: 301 Commerce Street, Suite 1380
Address 2: _____
City: Fort Worth State: TX Zip: 76102 + _____
Contact Person: Matthew Flanery
Phone: (817) 870-2707 Fax: (817) 870-2708
Email Address: _____

Well Location:
NE SW SE NW Sec. 6 Twp. 14 S. R. 11 East West
County: Russell
Lease Name: Stricker Well #: 2-6

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

Surface Owner Information:

Name: Leon H. Stricker and Delores D. Stricker
Address 1: 204 W 28th Street
Address 2: _____
City: Huchinson State: KS Zip: 67502 + _____

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 (House Bill 2032), 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 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.

I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date: 7/30/2010 Signature of Operator or Agent:  Title: Land Management