

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 #: 33074			API No	o. 15 - 12	<u>25-26400-0</u>	00-00		
Name: Dart Cherokee Bas	sin Operatin	g Co LLC	If pre	1967, supply	original completion	on date:		
Address 1: 211 W Myrtle Str				•				— <i>i</i>
Address 2:					Sec. 2 Twp			
City: Independence	State: KS Zip	<u>67301</u> ₊		77642	_ Feet from V	North Sou	uth Line of Sec	tion
Contact Person: Bill Barks	•			TO	Feet from	East We	st ne of Sec	tion
Phone: (620) 331-7870			Footag		od from Nearest O		orner:	
			Count		gomery			
				'	kshaw	Well #: <u>3</u>		
Check One: Oil Well Gas W	ell OG	D&A	Cathodic Wa	iter Supply V	Vell Othe	:		
SWD Permit #:		ENHR Permit #:		_ 🗆	Gas Storage Pe	rmit #:		
Conductor Casing Size:	Se	et at:		_ Cemented	d with:	 	Sa	acks
Surface Casing Size:	unknown Se	et at:	unknown	Cemented	d with:	unkı	n <mark>own</mark> sa	acks
Production Casing Size:	unknown Se	et at:	unknown	Cemented	d with:	unk	nown sa	icks
Elevation: 780' (G.L. / ☐ K.B.) Condition of Well: Good Poor Proposed Method of Plugging (attach a separa	Junk in Hole	Casing Leak at:		oth:	(Stone	Corral Formation)		
TIH to TD. Set cmt plug fr	-	•	estore loc.			•		
Is Well Log attached to this application?	Yes No	Is ACO-1 filed?	Yes No					
If ACO-1 not filed, explain why: Unknown if ACO-1 on file.								
Plugging of this Well will be done in accor					he State Corpora	tion Commissio	n	
Company Representative authorized to super						07004	<u> </u>	
Address: 211 W Myrtle Str			City: Independ	dence	State: KS	Zip: 67301	+	-—
Phone: (620) 331-7870								
Plugging Contractor License #: 5491							<u></u>	
Address 1: 1150 Hwy 39								
			·		State: KS	Zip: 69720	+	-—
Phone: (<u>620</u>) <u>431-4137</u>	9-20-10	, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>						
Proposed Date of Plugging (if known):	9-20-18)	<u></u>					_
Payment of the Plugging Fee (K.A.R. 82-3-	I18) will be guaran	teed ₂ by Operator or	Agent				RECEIV	'ED
Date: 9-9-10 Authorized 0	Operator / Agent:	Beth D	swald	/o:-	M. cm)		CED 1 2	2 010
		_		(Signa	nure)			2010

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.

Address 2: Lease Name: Yakshaw Well #: 3 City: Independence State: KS Zip: 67301 + If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below: Surface Owner Information: Name: Rod & Betty Yakshaw Address 1: 3580 CR5400 Address 2: City: Independence State: KS Zip: 67301 + City: 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.	OPERATOR: License # 33074 Name: Dart Cherokee Basin Operating Co LLC	Well Location: SW SE NE NW Sec. 2 Twp. 32 S. R. 15 ▼ East West
Contact Person: Bill Barks Bill Barks	Address 1: 211 W Myrtle Str	County: Montgomery
Contact Person: Phone: (620) 331-7870 Fax: (620) 331-7870 Email Address: bbarks@dartoilandgas.com Surface Owner Information: Name: Rod & Betty Yakshaw Address 1: 3580 CR5400 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 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 filling in connection with this form; 2) if the form being filled 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 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.	Address 2:	
Contact Person: (20) 331-7870		
Surface Owner Information: Name: Rod & Betty Yakshaw Address 1: 3580 CR5400 Address 2:	Contact Person:	the lease below.
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hereby certify that the statements made herein are true and correct to the best of my knowledge and belief. Date: 9-9-10 Signature of Operator or Agent: Actt Uswald Title: Engr Support Super	Independence State: KS Zip: 67301 +	andic Protection Borehole Intent), you must supply the surface owners and rich batteries, pipelines, and electrical lines. The locations shown on the plat on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. Act (House Bill 2032), I have provided the following to the surface located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form to being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address. acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this
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KCC WICHITA



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

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

DART CHEROKEE BASIN OPERATING CO., LLC 600 DART RD PO BOX 177 MASON, MI 48854-9327 September 14, 2010

Re: YAKSHAW #3

API 15-125-26400-00-00

2-32S-15E, 1100 FNL 2240 FWL

MONTGOMERY 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 13, 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

Steve Bond

Production Department Supervisor

District: #3 1500 W. 7th

Chanute, KS 67220 (620) 432-2300