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Kansas Corporation Commission Oil & Gas Conservation Division

Form CP-1
March 2010
March 2010
This Form must be Typed
Form must be Signed

WELL PLUGGING APPLICATION

Form must be Signed All blanks must be Filled 015000.0086.001

Form KSONA-1, Certification of Compliance with the Kansas Surface Owner Notification Act, MUST be submitted with this form.

OPERATOR: License #: 33074	API No. 15 - 125-29592-00-00		
Name: Dart Cherokee Basin Operating Co LLC	If pre 1967, supply original completion date:		
Address 1: 211 W Myrtle Str	Spot Description:		
Address 2:	NE_ SE_NE Sec. 11 Twp. 31 S. R. 1	5 ZEast West	
City: Independence State: KS zip: 67301 +	3,300 Feet from North / 🗸	South Line of Section	
Contact Person: Bill Barks	330 Feet from V East /	West Line of Section	
Phone: (620) 331-7870	Footages Calculated from Nearest Outside Sectio	n Corner:	
Priorie. (920)			
	County: Montgomery Lease Name: T Gutschenritter Well #	11.42	
	Lease Name: T Outscrieffitter Well #	11-42	
Check One: ☐ Oil Well	Cathodic Water Supply Well Other:		
SWD Permit #: ENHR Permit #:			
Conductor Casing Size: Set at:			
Surface Casing Size: Set at:			
Production Casing Size: 4 1/2" Set at:			
List (ALL) Perforations and Bridge Plug Sets: 1212' - 1216'			
Elevation: 915' ((G.L. / (K.B.) T.D.: 1250' PBTD:	Anhydrite Depth:		
Condition of Well: Good Door Junk in Hole Casing Leak at:	(Stone Corral Formation)	
Proposed Method of Plugging (attach a separate page if additional space is needed):	(Interval)		
	ut off csg. Restore loc		
Hook up to csg. Using sqz method, plug off perfs. C	ut off csg. Restore loc.		
		·	
Hook up to csg. Using sqz method, plug off perfs. C			
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Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

KCC WICHITA

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KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

JL 29 2011

OIL & GAS CONSERVATION DIVISION CERTIFICATION OF COMPLIANCE WITH THE WICH Form must be Signed All blanks must be Filled 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 (C	Cathodic Protection Borehole Intent)	
OPERATOR: License # 33074 Name:	Well Location: NE_SE_NE_Sec.11Twp. 31_S. R. 15✓ East West	
Address 1: 211 W Myrtle Str	County: Montgomery Lease Name: T Gutschenritter Well #: 11-42	
Address 2: KS 67301		
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:	
Contact Person: Bill Barks Phone: (620) 331-7870 Fax: (620) 331-7948		
Email Address: bbarks@dartoilandgas.com		
Surface Owner Information:		
Name: Tony Gutschenritter	When filing a Form T-1 involving multiple surface owners, attach an additional	
Name: Tony Gutschenritter Address 1: 12561 W 82nd	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	
Address 2:	county, and in the real estate property tax records of the county treasurer.	
City: Ter Lenexa State: KS Zip: 66215 + 2742		
	et (House Bill 2032), I have provided the following to the surface cated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form eing filed is a Form C-1 or Form CB-1, the plat(s) required by this	
☐ I have not provided this information to the surface owner(s). I ack KCC will be required to send this information to the surface own task, I acknowledge that I am being charged a \$30.00 handling for the surface of the surface own task, I acknowledge that I am being charged a \$30.00 handling for the surface owner.	ner(s). To mitigate the additional cost 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-1	ee with this form. If the fee is not received with this form, the KSONA-1 will be returned.	
I hereby certify that the statements made herein are true and correct to t		
Date: 7-27-10 Signature of Operator or Agent. Roth	awald Title: EingrSupport Supvr	
Date: 7=27-10 Signature of Operator or Agent: Both (Illum SAfety MANASCI	
	RECEIVED	

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

AUG 0 5 2010



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 August 19, 2010

Re: T GUTSCHENRITTER #11-42 API 15-125-29592-00-00 11-31S-15E, 3300 FSL 330 FEL 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 February 15, 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