## 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 #: 4058   |  | API No. 15 - 007-                                      | 22,411-   | 0002                         |                      |  |
|---|--|--|---|------------------------------|----------------------|--|
| Name: American Warrior INC  |  | If pre 1967, supply original completion date: _7-25-01 |   |                              |                      |  |
| Address 1: P.O.Box 399  |  | Spot Description:                                      | SW 11-  | 32s-15w                      |                      |  |
| Address 2:  |  | SE_NE_SWSe   | c. <u>11                                   </u> | p. <u>32</u> S. R. <u>15</u> |                      |  |
| City: Garden City State: Ks   |  |  | eet from [                                      | North / Sc                   | outh Line of Section |  |
| Contact Person: Kevin Wiles SR  |  | - <u>2,790</u> <sub>F</sub>                            | eet from  | ▼ East /  W                  | est Line of Section  |  |
| Phone: (620 ) 275-2963  |  | Footages Calculated fr                                 |   | t Outside Section C          | Corner:              |  |
| ,   |  | County: Barber   | ] 1444  | J 3L V 344                   |                      |  |
|   |  | Lease Name: Alexa                                      | nder  | Well #: _                    | N-1 SWD              |  |
| Check One: Oil Well Gas Well OG   | D&A Catho                                | odic Water Supply Well                                 |   | ther:                        |                      |  |
| ✓ SWD Permit #: D-28,554  | ENHR Permit #:                           |  | . —   | Permit #:                    |                      |  |
| Conductor Casing Size:  | Set at:                                  | Cemented wit   | n:  |                              | Sacks                |  |
| Surface Casing Size: 8-5/8"   | Set at: 240'                             |  |   |                              |                      |  |
| Production Casing Size: 4-1/2"  | Set at: 2598'                            | Cemented wit   | n: <u>350</u>                                   |                              | Sacks                |  |
| List (ALL) Perforations and Bridge Plug Sets:   |  |  |   |                              |                      |  |
| Condition of Well:  Good  Poor  Junk in Hole Proposed Method of Plugging (attach a separate page if additional As Per District ones Instructions  Is Well Log attached to this application?  Yes  No If ACO-1 not filed, explain why:  Plugging of this Well will be done in accordance with K.S Company Representative authorized to supervise plugging of | Is ACO-1 filed?                          | ıles and Regulations of the S                          | itate Corpo                                     | oration Commissio            | on                   |  |
|   | City                                     |  | <sub>ate:</sub> Ks                              | z <sub>ip:</sub> 67846       | +                    |  |
| Phone: ( 620 ) 275-2963   | ·  |  |   | ·                            |                      |  |
| Plugging Contractor License #: 99996  | Nar                                      | ne: Allied Cementing                                   |   |                              | ·                    |  |
| D O D 04  | Add                                      |  |   |                              |                      |  |
| City: Russell   |  | S  | ate: KS   | Zip: 67665                   | + _0031              |  |
| , 70E \ 183 2627  | W. W |  |   |                              |                      |  |
| Proposed Date of Plugging (if known): ASAP  |  |  |   |                              |                      |  |
| Payment of the Plugging Fee (K.A.R. 82-3-118) will be gua   | ranteed by Operator or Acter             | *  |   |                              |                      |  |
| Date: 10-6-2010 Authorized Operator / Agent   |  | in 2   |   |                              | RECEIVED             |  |
| , , , , , , , , , , , , , , , , , , ,   |  | (Signature)  |   |                              | <del></del>          |  |

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

OCT 0 7 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.

| OPERATOR: License # 4058   |  |  |  |  |
|--|--|--|--|--|
| Name: American Warrior INC   | Well Location:  SE_NE_SW Sec. 11 Twp. 32S. R. 15 East  West  |  |  |  |
| Address 1: P.O.Box 399   | <b>D</b> = 1 .   |  |  |  |
| Address 2:   | County: Barber  Lease Name: Alexander Well #: N-1 SWD  |  |  |  |
| City: Garden City State: Ks Zip: 67846 +   | If filing a Form T-1 for multiple wells on a lease, enter the legal description of   |  |  |  |
| Contact Person: Kevin Wiles SR   | the lease below:   |  |  |  |
| Phone: ( 620 ) 275-2963 Fax: (620 ) 275-5067   |  |  |  |  |
| Email Address: kwiles@pmtank.com   |  |  |  |  |
| Surface Owner Information: Name: Ted Alexander   | When filing a Form T-1 involving multiple surface owners, attach an additional   |  |  |  |
| Address 1: 19718 SW Highway 160  | sheet listing all of the information to the left for each surface owner. Surface   |  |  |  |
| Address 2:   | 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.  |  |  |  |
| City: Sun City State: KS Zip: 67143 +  |  |  |  |  |
| the KCC with a plat showing the predicted locations of lease roads, tank   | dic Protection Borehole Intent), you must supply the surface owners and  |  |  |  |
| are preliminary non-binding estimates. The locations may be entered or   | batteries, pipelines, and electrical lines. The locations shown on the plat<br>on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.  |  |  |  |
| <ul> <li>are preliminary non-binding estimates. The locations may be entered or</li> <li>Select one of the following:</li> <li>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 locations.</li> </ul>  | on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.  Cut (House Bill 2032), I have provided the following to the surface posted: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form the leging filed is a Form C-1 or Form CB-1, the plat(s) required by this  |  |  |  |
| are preliminary non-binding estimates. The locations may be entered on 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 IC CP-1 that I am filing in connection with this form; 2) if the form to form; and 3) my operator name, address, phone number, fax, an I have not provided this information to the surface owner(s). I address.  | at the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.  Cut (House Bill 2032), I have provided the following to the surface excated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form theing filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address.  Consider the control of the control o |  |  |  |
| are preliminary non-binding estimates. The locations may be entered or 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 located CP-1 that I am filing in connection with this form; 2) if the form of form; and 3) my operator name, address, phone number, fax, an I have not provided this information to the surface owner(s). I acknowledge that I am being charged a \$30.00 handling   | oct (House Bill 2032), I have provided the following to the surface ecated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form leing filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address.  Coknowledge that, because I have not provided this information, the ener(s). To mitigate the additional cost of the KCC performing this fee, payable to the KCC, which is enclosed with this form.  |  |  |  |
| 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 loce. CP-1 that I am filing in connection with this form; 2) if the form to form; and 3) my operator name, address, phone number, fax, an I have not provided this information to the surface owner(s). I acknowledge that I am being charged a \$30.00 handling of the choosing the second option, submit payment of the \$30.00 handling. | at the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.  Ct (House Bill 2032), I have provided the following to the surface ecated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form reing filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address.  Cknowledge that, because I have not provided this information, the ner(s). To mitigate the additional cost of the KCC performing this fee, payable to the KCC, which is enclosed with this form.  The with this form. If the fee is not received with this form, the KSONA-1 will be returned.   |  |  |  |

RECEIVED OCT 0 7 2010 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)

AMERICAN WARRIOR, INC. PO BOX 399 GARDEN CITY, KS 67846 October 08, 2010

Re: ALEXANDER #N-1 SWD API 15-007-22411-00-02 11-32S-15W, 1490 FSL 2790 FEL BARBER 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 April 6, 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

Stud Bond

**Production Department Supervisor** 

District: #1 210 E Frontview, Suite A Dodge City, KS 67801 (620) 225-8888