# OCT 2 8 2010 KCC WICHITA

#### 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,

OPERATOR: License #: _34318	API No. 15 - 167-085 91-0000	
Name:Berexco, L.L.C.	If pre 1967, supply original completion date: 4-27-39	
Address 1: _ P. O. Box 723	Spot Description:	
Address 2: 2020 N. Bramblewood, Wichita, KS 67206	NW NW SE Sec. 17 Twp. 15 S. R. 13 East ✓ West	
City: Hays State: KS Zip: 67601 +		
Contact Person: Dennis Kirmer	Feet from  ✓ East /  West Line of Section	
Phone: (785 ) 628-6101	Footages Calculated from Nearest Outside Section Corner:	
Thore. ( )	County: Russell	
	Lease Name: Fom Sellens Well #: #1	
	7.	
Check One: Oil Well Gas Well OG D&A Cat	thodic Water Supply Well Other: Injection well	
SWD Permit #: FNHR Permit #:	Gas Storage Permit #:	
Conductor Casing Size: Set at:	Cemented with: Sacks	
Surface Casing Size: 13 1/8 Set at: 236'	Cemented with: 150sx Sacks	
Production Casing Size: 8 5/8 Set at: 2990'	Cemented with: 275' Sacks	
Tilliner 2930-2991 5 1/2 liner 2991-3236 Perfs 2 CIBP 3040, 3178	, ,	
Elevation: 1800 ( (G.L. / K.B.) T.D.: 3240 PBTD: 3040	Anhydrite Depth:(Stone Corral Formation)	
Condition of Well: Good Poor Junk in Hole Casing Leak at:		
Proposed Method of Plugging (attach a separate page if additional space is needed):	(Interval)	
Follow rules and regulations required by KCC.		
Is Well Log attached to this application? Yes No Is ACO-1 filed? Yes	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: Dennis Kirn	ner	
Address: P.O. Box 723	State: KS Zip: 67601 +	
Phone: ( 785 ) 628-6101	<del></del>	
Plugging Contractor License #: 34318	Berexco, L.L.C.	
	ddress 2: 2020 N. Bramblewood, Wichita, KS 67206	
City: Hays	State: KS Zip: 67601 +	
Phone: ( <u>785</u> ) <u>628-6101</u>	.1	
Proposed Date of Plugging (if known):	150	
Payment of the Plugging Fee (K.A.R. 82-3-118) will be guaranteed by Operator or Ag  Date: 10-26-10 Authorized Operator / Agent: Agent: Agent	Kines W	
Date: 10-26-10 Authorized Operator / Agent: Abnus	(Signatura) / A	



#### 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.

	(Cathodic Protection Borehole Intent) T-1 (Transfer) X CP-1 (Plugging Application)
OPERATOR: License #	Well Location:
D O D =00	NW NW SE. Sec. 17 Twp. 15 S. R. 13 East West County: Russell  Lease Name: Tom Sellens Well #: #1
Address 1: P. O. Box 723	
Address 2: 2020 N. Bramblewood, Wichita, KS 67206	Lease Name: 10m Sellens Well #: #1
City: Hays State: KS Zip: 67601 +	in hing a Forth 1-1 lot multiple wells on a lease, enter the legal description of
Contact Person: Dennis Kirmer	the lease below:
Phone: (785 ) 628-6101 Fax: (785 ) 628-8870	
Email Address: Dkirmer@berexco.com	
Surface Owner Information:	
Name: Irene Miller Family Trust	When filing a Form T-1 involving multiple surface owners, attach an additional
Name: Irene Miller Family Trust  Address 1: 537 NW 230 Road  Address 2:	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.
City: Russell State: KS Zip: 67665 +	
Tar in the state of the state o	odic Protection Borehole Intent), you must supply the surface owners and old by 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.
X I cortifu that pursuant to the Kannan C. C	
I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be CP-1 that I am filing in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax, a	ocated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form being filed is a Form C-1 or Form CB 1, the plat(c) required by the
CP-1 that I am filing in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax, a	being filed is a Form C-1 or Form CB-1, Form CB-1, Form T-1, or Form 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 when(s). To mitigate the additional cost of the KCC performing this
CP-1 that I am filing in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax, at I have not provided this information to the surface owner(s). I a KCC will be required to send this information to the surface owner(s), I acknowledge that I am being charged a \$30.00 handling.	being filed is a Form C-1 or Form CB-1, Form CB-1, Form T-1, or Form 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 wner(s). To mitigate the additional cost of the KCC performing this gree, payable to the KCC, which is enclosed with this form.
CP-1 that I am filing in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax, a  I have not provided this information to the surface owner(s). I a KCC will be required to send this information to the surface owner(s), I acknowledge that I am being charged a \$30.00 handling of choosing the second option, submit payment of the \$30.00 handling.	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 wner(s). To mitigate the additional cost of the KCC performing this gree, 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.



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

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

BEREXCO LLC 2020 N. BRAMBLEWOOD WICHITA, KS 67206 October 28, 2010

Re: T SELLENS #1-I

API 15-167-08591-00-02

17-15S-13W, 2356 FSL 2403 FEL RUSSELL 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 26, 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: #4
2301 E. 13th

Hays, KS 67601 (785) 625-0550