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.

	tted with this form.
OPERATOR: License #: 3682	
Name: Mark Connell	If pre 1967, supply original completion date: 2/61
Address 1: 606 W. Albro	Spot Description:
Address 2:	C_SW_NW_NW _{Sec.} 35 Twp. 18 s. R. 11East X West
City: Claflin State: KS Zip: 67525 +92	34 Feet from North South Line of Section
Contact Person: Mark Connell	Feet from East / West Line of Section
	Footages Calculated from Nearest Outside Section Corner:
Phone: (620) 786-1228	NE NW SE SW Barton
	Ames Unit 10
	Lease Name: Well #:
Check One:	Cathodic Water Supply Well Other:
	Gas Storage Permit #:
Conductor Casing Size: Set at:	
Surface Casing Size: 8 5/8 Set at: 553 Production Casing Size: 5 1/2 Set at: 3305	
List (ALL) Perforations and Bridge Plug Sets: $LKC \ 3161-67$, Arb	ukle OH 3300-3330
Elevation: 1770 ((Stone Corral Formation) (Interval) hole with tubing
Plugging of this Well will be done in accordance with K.S.A. 55-101 $\underline{\text{et. seq.}}$ and Company Representative authorized to supervise plugging operations: $\underline{\text{Mark}}$	
Address: 606 W. Albro	City: Claflin State: KS Zip. 67525 + 9234
Phone: (20) 786-1228	
Plugging Contractor License #: 3/528	Name: Mike's Testing & Salvage, Inc.
PO Box 467	- Address 2:
City: Chase	State: KS Zip: 67524 +
Phone: (620 938-2943	State ZIP
Na acon sa contra	ictor can do it
Proposed Date of Plugging (if known): AS SOOII AS COILCLA	RECEIVED
Payment of the Plugging Fee (K.A.R. 82-3-118) will be guaranteed by Operator of	7 Agent / DEC 1 7 2010
Date: /a//0//0 Authorized Operator / Agent:	
/ difformed Operator / Agent.	(Signature) KCC WICHITA

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.

2622	
OPERATOR: License # 3682	Well Location:
Name: Mark Connell	C.SW.NW.NW Sec. 35 Twp.18 S. R. 11 East West County: Barton Lease Name: Ames Unit Well #: 10 If filing a Form T-1 for multiple wells on a lease, enter the legal description on the lease below:
Address 1: 606 W. Albro	
Address 2:	
Contact Person: Mark Connell	
Phone: (620) 786-1228 Fax: ()	
Email Address:	
Surface Owner Information:	
Name: Donald Fiest	When filing a Form T-1 involving multiple surface owners, attach an additiona
Address 1: 200 W 11th St.	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: Ellinwood State: KS Zip: 67526+	
are preliminary non-binding estimates. The locations may be entered or Select one of the following:	batteries, pipelines, and electrical lines. The locations shown on the plat the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.
owner(s) of the land upon which the subject well is or will be lo 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, and	
owner(s) of the land upon which the subject well is or will be lot CP-1 that I am filing in connection with this form; 2) if the form beform; and 3) my operator name, address, phone number, fax, as I have not provided this information to the surface owner(s). I as KCC will be required to send this information to the surface owner(s), I acknowledge that I am being charged a \$30.00 handling	cated: 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(s) required by this and email address. Cknowledge 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.
owner(s) of the land upon which the subject well is or will be lot CP-1 that I am filing in connection with this form; 2) if the form beform; and 3) my operator name, address, phone number, fax, as I have not provided this information to the surface owner(s). I as KCC will be required to send this information to the surface owner(s), I acknowledge that I am being charged a \$30.00 handling	pocated: 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(s) required by this and email address. Cknowledge that, because I have not provided this information, the mer(s). To mitigate the additional cost of the KCC performing this fee, payable to the KCC, which is enclosed with this form. If the fee is not received with this form, the KSONA-1
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owner(s) of the land upon which the subject well is or will be lot CP-1 that I am filing in connection with this form; 2) if the form the form; and 3) my operator name, address, phone number, fax, as I have not provided this information to the surface owner(s). I as KCC will be required to send this information to the surface owners, I acknowledge that I am being charged a \$30.00 handling. 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-	pocated: 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(s) required by this and email address. Exhowledge that, because I have not provided this information, the mer(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.

KCC WICHITA

DEC 17 2010

December 10, 2010

Mr. Donald Feist 200 W. 11th St. Ellinwood, KS 67526

Mark Connell 606 W. Albro Claflin, KS 67525

RE: Ames Unit #1 & #10 plugging

Dear Mr. Feist:

This letter will serve as notice that I intend to move in and plug the Ames Unit #1, & #10 within the next sixty days. The plugging contractor will be Mike's Testing & Salvage, Inc. of Chase, Kansas. If you have any questions, please feel free to call me at 620-786-1228.

Thank You,

Mark Connell

cc: KCC



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

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

CONNELL, MARK ALLEN 606 W ALBRO ST CLAFLIN, KS 67525-9234

January 05, 2011

Re: AMES UNIT #10

API 15-009-14839-00-00

35-18S-11W, 4290 FSL 4950 FEL BARTON 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 July 4, 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