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 #: 3682	API No. 15 - 009-30847-00-00
Name: Mark Connell	If pre 1967, supply original completion date: 4/53
Address 1: 606 W. Albro	Spot Description:
	C NW NE SW _{Sec.} 26 Twp. 18 S. R. 11 East West
Address 2:	4 2310 Feet from North / X South Line of Section
	Feet from East / West Line of Section
Contact Person: Mark Connell	Footages Calculated from Nearest Outside Section Corner:
Phone: (620) 786-1228	NE NW SE SW
	County: Barton Lease Name: Ames UNIT Well #: 1
	Lease Name: Well #:
Check One: X Oil Well Gas Well OG D&A Cath	nodic Water Supply Well Other:
	Gas Storage Permit #:
Conductor Casing Size: Set at:	Cemented with: Sacks
Surface Casing Size: 8 5/8 Set at: 190	
Production Casing Size: 5 1/2 Set at: 3313	Cemented with: 100 Sacks
List (ALL) Perforations and Bridge Plug Sets: LKC 3054-58,3090-9 3313-3328,CIBP & Wood plug drove to tubing parted when layed down, top o	bottom in OH after sqz job in 1976.
Elevation: 1773 (XG.L./ K.B.) T.D.: 3328 PBTD: 2100	Anhydrite Depth:(Stone Corral Formation)
Condition of Well: Good Poor X Junk in Hole Casing Leak at:	(Interval)
Proposed Method of Plugging (attach a separate page if additional space is needed):	(interver)
Perforate and plug coming out of hol	e with tubing
Is Well Log attached to this application? Yes n No is ACO-1 filed? Yes	es 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 F	Rules and Regulations of the State Cornoration Commission
	Connel1
Address: 606 W. Albro	Claflin State: KS Zip: 67525 + 9234
Phone: (_620, 786-1228	,,
Plugging Contractor License #: 3/528	ame: Mike's Testing & Salvage, Inc.
Address 1: PO Box 467	
	State: KS Zip: 67524 +
Phone: (620 938-2943	,
Proposed Date of Plugging (if known): As soon as contracto	r can do it
	RECEIVED
Payment of the Plugging Fee (K.A.R. 82-3-118) will be guaranteed by Operator or Age	DEC 1 7 2010
Date: Authorized Operator / Agent:	(Signature)

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

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.

Select the corresponding form being filed: C-1 (Intent) CB-1 (C	Cathodic Protection Borehole Intent) T-1 (Transfer) X CP-1 (Plugging Application)
OPERATOR: License # 3682	Well Location:
Name: <u>Mark Connell</u>	C NW NE SW _{Sec.} 26 Twp. 18 S. R. 11 East West
Address 1: 606 W Albro	County: Barton Lease Name: Ames Unit Well #: 1
Address 2:	Lease Name: Ames Unit Well #: 1
City: Claflin State: KS Zip: 67525 + 9234	If filing a Form T-1 for multiple wells on a lease, enter the legal description of
Contact Person: Mark Connell	the lease below:
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 additional
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:	n the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.
I certify that, pursuant to the Kansas Surface Owner Notice Acowner(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 be form; and 3) my operator name, address, phone number, fax, and	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(s) required by this
	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.
form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1	fee 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-	the best of my knowledge and belief
Date: /3/10/10 Signature of Operator or Agent	Description RECEIVED
Signature of Operator of Agen	1 7 2010
	Title: Of Mayor 17 2010 KCC WICHITA

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

RECEIVED
DEC 1 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)

CONNELL, MARK ALLEN 606 W ALBRO ST CLAFLIN, KS 67525-9234 January 05, 2011

Re: AMES UNIT #1

API 15-009-30847-00-00

26-18S-11W, 2310 FSL 3630 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

Stur Bond

Production Department Supervisor

District: #4 2301 E. 13th Hays, KS 67601 (785) 625-0550