## 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 #: 5399		API No. 15 - 063-20944-0001	
Name: American Energies Corporation		If pre 1967, supply original completion date:	
Address 1: 155 North Market		Spot Description: C NE NW NE	
Suito 710		C NE NW NE Sec. 16 Twp. 15 S.	R. 26 East ✓ West
City: Wichita State: KS Zip: 67202 +		4,950 Feet from North / South Line of Section	
Contact Person: Mindy Wooten		1,650 Feet from East A	West Line of Section
Phone: (316 ) 201-1134		Footages Calculated from Nearest Outside S  NE NW SE  County: Gove	sw
		Lease Name: Norton w	/ell #: <u>B1</u>
Check One: Oil Well Gas Well OG	D&A Cathodic		
SWD Permit #:	ENHR Permit #:	Gas Storage Permit #: _	
Conductor Casing Size: None			
Surface Casing Size: 8 5/8"		Cemented with: 170	
Production Casing Size: 4 1/2"	Set at: 4236'	Cemented with: 200	Sacks
of 1700' and perforated from 1520 - 1  Elevation: 2356( G.L./ K.B.) T.D. 4250  Condition of Well: Good Poor Junk in Hole  Proposed Method of Plugging (attach a separate page if additions)  As per KCC rules and regulations	PBTD: An An Casing Leak at: (In	hydrite Depth: (Stone Corral Fo	rmation)
Is Well Log attached to this application? Yes V No	Is ACO-1 filed? 🗸 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 soo and the Rule	s and Populations of the State Corporation Co.	malasian
Company Representative authorized to supervise plugging o		s and Regulations of the State Corporation Co	mmission
Address: 155 North Market, Suite 710		Wichita State: KS Zip: 6	7202
Phone: ( 620 ) 793-2146	Oily.	Otate 21p	
Plugging Contractor License #: 6454		. Cheyenne Well Service	
		ss 2:	
		State: KS Zip: 6	7560 +
700 0000		2000	
Proposed Date of Plugging (if known): As soon as po	ossible		The second second
			RECEIVED
Payment of the Plugging Fee (K.A.R. 82-3-118) will be gua	aranteed by Operator or Agent	0 1.1 A.	JAN 19 201
Date: 1/12/11 Authorized Operator / Agen		Step Wood	

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:	(Cathodic Protection Borehole Intent) T-1 (Transfer) X CP-1 (Plugging Application)	
OPERATOR: License #	Well Location:  C NE NW NE Sec. 16 Twp. 15 S. R. 26 ☐ East West	
Name:Address 1:155 North Market	County: Gove	
Address 2: Suite 710	Lease Name: Norton Well #: B1	
City: Wichita State: KS Zip: 67202 +		
Contact Person: Mindy Wooten	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:	
Phone: (316 ) 201-1134 Fax: (316 ) 263-1851	- -	
Email Address: mindy@americanenergies.com		
Surface Owner Information:		
	When filing a Form T-1 involving multiple surface owners, attach an additional sheet listing all of the information to the left for each surface owner. Surface	
Name: Attention: Mr. Robert M. Abbey  Address 1: Rainbow Trout Farms, Inc.		
Address 2: P.O. Box 781029	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: San Antonio State: Texas Zip: 78278 +		
are preliminary non-binding estimates. The locations may be entered of Select one of the following:	nk 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.	
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, and I have not provided this information to the surface owner(s). It	acknowledge that, because I have not provided this information, the wner(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	g fee with this form. If the fee is not received with this form, the KSONA-1 -1 will be returned.	
I hereby certify that the statements made herein are true and correct t	o the best of my knowledge and belief.	
Date: 1/12/11 Signature of Operator or Agent:	De Julian Title: Mindy Wooten, Production Mgr.	
	RECEIVED	

JAN 1 9 2011