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 #: 5237		API No. 15 - 095-22216-0	0-00				
Name:Plano Petroleum Corporation Address 1:P. O. Box 860247 Address 2:		If pre 1967, supply original completion date: Spot Description: SW_NW_SESec. 18Twp. 27_ S. R. 9East West1,620Feet fromNorth / South Line of Section					
				Contact Person: Ken Fletcher	Zip	2,030 Feet from [East / West Line of Section
				070 400 4005		Footages Calculated from Neares NE NW County: Kingman Lease Name: Hansen Family	
				Check One: Oil Well Gas Well OG	✓ D&A Cathodic	: Water Supply Well Ot	her:
SWD Permit#:	ENHR Permit #:	Gas Storage	Permit #:				
Conductor Casing Size:	Set at:	Cemented with:	Sacks				
Surface Casing Size: 8 5/8"	Set at: 269'	Cemented with: 225	Sacks				
Production Casing Size: None	Set at:	Cemented with:	Sacks				
List (ALL) Perforations and Bridge Plug Sets:							
Heavy mud in hole. Bottom plug @ 140 319' with 35 sks., top plug @ 60' with 25 is Well Log attached to this application? Yes \(\text{No} \) No If ACO-1 not filed, explain why:	5 sks. cemented to sur	face. Put 15 sks in rathol					
Plugging of this Well will be done in accordance with K.S. Company Representative authorized to supervise plugging of	' - '	s and Regulations of the State Corp	oration Commission				
Address: P. O. Box 860247	City: _	Plano State: Tx	zip: _75086 +				
Phone: (972) 422-4335							
		Name: Maverick Drilling, LLC					
Address 1: 100 S. Main, Suite 440		ss 2:	 				
City: Wichita		State: Ks	zip: <u>67202</u> +				
Phone: (316_)262-6700							
Proposed Date of Plugging (if known): 12/15/2010	PYA						
Payment of the Plugging Fee (K.A.R. 82-3-118) will be gu Date: 1/24/2011 Authorized Operator / Ager		Walter (Signature)	RECEIVED				
		(orginal as)	- T - / IAM 3 1 201				

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

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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	(Cathodic Protection Borehole Intent) T-1 (Transfer) CP-1 (Plugging Application)	
OPERATOR: License # 5237 Name: Plano Petroleum Corporation	Well Location:SW_NW_SESec.18Twp.27S. R. 9 ☐ East West	
Address 1: P. O. Box 860247	County: Kingman	
Address 2:	County: Kingman Lease Name: Hansen Family Farms Well #: 18-1	
City: Plano State: Tx. Zip: 75086 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:	
Contact Person: Ken Fletcher Phone: (972) 422-4335 Fax: (972) 424-3184		
Email Address:		
Surface Owner Information: Name: Hansen Family Farms Address 1: 12470 N.W. 30th St.	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	
Address 1: 12470 N.W. 30th St.	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.	
Address 2.		
City: Cunningham State: Ks Zip: 67035 +		
the KCC with a plat showing the predicted locations of lease roads, tan	odic Protection Borehole Intent), you must supply the surface owners and k 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 I 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	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 to		
Date: 1/24/2011 Signature of Operator or Agent:	Title: President	

RECEIVED

JAN 3 1 2011