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 #: 33074 | API No. 15 - 125-29276-00-00 |
|--------------------------------------------------------------------------------------|----------------------------------------------------------------------------|
| Name: Dart Cherokee Basin Operating Co LLC | If pre 1967, supply original completion date: |
| Address 1: 211 W Myrtle Str | Spot Description: |
| Address 2: | <u>E2_ SE_NE</u> Sec. <u>18</u> Twp. <u>31</u> S. R. <u>16</u> ✓ East West |
| City: Independence State: KS Zip: 67301 + | 3,300 Feet from North / South Line of Section |
| Contact Person; Bill Barks | 330 Feet from 🗸 East / 🗌 West Line of Section |
| Phone: (620) 331-7870 | Footages Calculated from Nearest Outside Section Corner: |
| Priorie. (920) | NE NW ✓ SE SW County: Montgomery |
| | Lease Name: Adee Well #: 2 |
| Check One: ☐ Oil Well ☐ Gas Well ☐ OG ☐ D&A ☐ Ca | athodic Water Supply Well Other: |
| SWD Permit #: ENHR Permit #: | Gas Storage Permit #: |
| Conductor Casing Size: Set at: | Cemented with: Sacks |
| Surface Casing Size: Set at: | 40' Cemented with: unknown Sacks |
| Production Casing Size: 4 1/2" Set at: | 1035' Cemented with: unknown Sacks |
| unknown 1040 1005 | -1 |
| Elevation: 776' ([G.L./] K.B.) T.D.: 1040' PBTD: 1035 | Anhydrite Depth:(Stone Corral Formation) |
| Condition of Well: 🗹 Good 🗌 Poor 🔲 Junk in Hole 📗 Casing Leak at: | (Interval) |
| Proposed Method of Plugging (attach a separate page if additional space is needed): | (nwar van) |
| TIH to 1035'. Set cmt plug fr 1035' - surf. Cut off csg. | Restore loc. |
| 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. seq. and the | • |
| Company Representative authorized to supervise plugging operations: Aaron Ha | City: Independence State: KS Zip: 67301 + |
| Address: | City: |
| Thomas () | Name: W&W Production |
| 4450 Lhan 20 | |
| | |
| City: Chanute Phone: (620_) _431-4137 | State: KS zip: 69720 + |
| Phone: (020) 431-4137 Proposed Date of Plugging (if known): before 3-31-11 | |
| | |
| Payment of the Plugging Fee (K.A.R. 82-3-118) will be guaranteed by Operator or A | |
| Date: 3-9-11 Authorized Operator / Agent: Joseph | (Signature) SECEIVED |

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

MAR 1 4 2011

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 # 33074 Name: Dart Cherokee Basin Operating Co LLC Address 1: 211 W Myrtle Str | Well Location: |
| | Lease Name: Adee Well #: 2 |
| Address 2: | If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below: |
| Surface Owner Information: Name: Timothy Adee Address 1: 4140 CR 6400 Address 2: | 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 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. |
| If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. Select one of the following: | |
| ☑ I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address. | |
| I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form. | |
| 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-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: 3-9-11 Signature of Operator or Agent: Beth Burald Title: Engr Support Supvr | |
| | |

MAR 1 4 2011



Sam Brownback, Governor, Thomas E. Wright, Chairman Ward Loyd, Commissioner

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

DART CHEROKEE BASIN OPERATING CO., LLC 600 DART RD PO BOX 177 MASON, MI 48854-9327 March 16, 2011

Re: ADEE #2

API 15-125-29276-00-00

18-31S-16E, 3300 FSL 330 FEL

MONTGOMERY 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 September 12, 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: #3 1500 W. 7th

Chanute, KS 67220 (620) 432-2300