# 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 - 205-27398-0  | 0-00                          |  |
|--|---|-------------------------------|--|
| Name: Dart Cherokee Basin Operating Co LLC   | If pre 1967, supply original completion date:                           |                               |  |
| Address 1: P O Box 177   | Spot Description:   |                               |  |
| Address 2:   | · ·   | 30 S. R. 13 ▼ East West       |  |
| City: Mason State: MI Zip: 48854 + 0177  |   | North / South Line of Section |  |
| Contact Person: Beth Oswald  |   | East / West Line of Section   |  |
| Phone: (517 ) 244-8716   | Footages Calculated from Nearest Outside Section Corner:  NE NW ✓ SE SW |                               |  |
|  | County: Wilson  | - 044                         |  |
|  | Lease Name: Tindle  | Well #: A-1                   |  |
| Check One: Oil Well  | lic Water Supply Well Other   |                               |  |
|  | Gas Storage Per   |                               |  |
| Conductor Casing Size: Set at:   | <del></del>   |                               |  |
| Surface Casing Size: 8 5/8" Set at:  |   |                               |  |
| Production Casing Size: 4 1/2" Set at:   |   |                               |  |
| List (ALL) Perforations and Bridge Plug Sets:  |   |                               |  |
| NA   |   |                               |  |
|  |   |                               |  |
| Elevation: 860 ( G.L. / G.K.B.) T.D.: 1580' PBTD: NA A   | nhydrite Depth:   |                               |  |
|  | (Stone  | Corral Formation)             |  |
| •  | Interval)   |                               |  |
| Proposed Method of Plugging (attach a separate page if additional space is needed):  TIH to 1580'. Set cmt plug fr 1580' - surf. Cut off csg. Re | estoro loc  |                               |  |
| Till to 1300. Set clift play if 1300 - Sulf. Cut on csy. The   | 531016 100.   |                               |  |
|  |   |                               |  |
| Is Well Log attached to this application? Yes 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 Rul   | es and Regulations of the State Corpora                                 | ition Commission              |  |
| Company Representative authorized to supervise plugging operations:  Aaron Hamr  |   |                               |  |
| Address: P O Box 177   | Mason State: MI   | 7ip. 48854 +                  |  |
| Phone: (517) 244-8716  | Otato.  |                               |  |
|  | : W&W Production  |                               |  |
| Address 1: 1150 Hwy 39   |   |                               |  |
|  | State: KS   | z <sub>ip:</sub> 69720 +      |  |
| Phone: (620_) 431-4137   |   | •                             |  |
| Proposed Date of Plugging (if known): May 9, 2011  |   |                               |  |
| Troposed bate of trogging (minomy).  |   | RECEIVED                      |  |
| Payment of the Plugging Fee (K.A.R. 82-3-118) will be guaranteed by Operator or Agen   |   | APR 2 8 2011                  |  |
| Date: 4-25-11 Authorized Operator / Agent: Authorized Operator / Agent:  | CSignature) (Signature)   |                               |  |
| Mail to: KCC - Conservation Division, 130 S. Mark  | , -   | KCC WICHITA                   |  |
| Mail to: NCC - Conservation Division, 130 S. Marki   | st - Novill Zviv, tricilita, Nalisas Vizi                               | J                             |  |

### 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.

| 22074  |  |  |
|--|--|--|
| OPERATOR: License # 33074  Name: Dart Cherokee Basin Operating Co LLC  | Well Location:   |  |
| Address 1: P O Box 177   |  |  |
| Address 2:   | County: Wilson  Lease Name: Tindle Well #: A-1   |  |
| Contact Parson Beth Oswald   | If filing a Form T-1 for multiple wells on a lease, enter the legal description o<br>the lease below:  |  |
| Phone: ( 517 ) 244-8716 Fax: ( 620 ) 331-7870  |  |  |
| Email Address: bbarks@dartoilandgas.com  |  |  |
| Surface Owner Information:   |  |  |
| Name: Terry & Debra Tindle   | 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   |  |
| Address 1: 8106 Chase Rd   |  |  |
| Address 2:   | county, and in the real estate property tax records of the county treasurer.   |  |
| City: Fredonia State: KS Zip: 66736 +  |  |  |
| Select one of the following:   | 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 A owner(s) of the land upon which the subject well is or will be loced 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, and a content of the c | ecated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form reing filed is a Form C-1 or Form CB-1, the plat(s) required by this   |  |
| 12.11.1, 2.12 2, 1.1 <i>y</i> 2 p 2.12.12  |  |  |
| I have not provided this information to the surface owner(s). I as   | cknowledge that, because I have not provided this information, the ner(s). To mitigate the additional cost of the KCC performing this  |  |
| I have not provided this information to the surface owner(s). I acknowledge that I am being charged a \$30.00 handling   | cknowledge that, because I have not provided this information, the ner(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   |  |
| I have not provided this information to the surface owner(s). I as KCC will be required to send this information to the surface ow task, 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-I hereby certify that the statements made herein are true and correct to   | cknowledge that, because I have not provided this information, the ner(s). To mitigate the additional cost of the KCC performing this fee, payable to the KCC, which is enclosed with this form.  fee with this form. If the fee is not received with this form, the KSONA-1 will be returned.  the best of my knowledge and belief. |  |
| I have not provided this information to the surface owner(s). I as KCC will be required to send this information to the surface ow task, 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-I hereby certify that the statements made herein are true and correct to   | cknowledge that, because I have not provided this information, the ner(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 will be returned.  Title: Engr Support Supvr                                |  |
| I have not provided this information to the surface owner(s). I as KCC will be required to send this information to the surface ow task, 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-I hereby certify that the statements made herein are true and correct to   | cknowledge that, because I have not provided this information, the ner(s). To mitigate the additional cost of the KCC performing this fee, payable to the KCC, which is enclosed with this form.  fee with this form. If the fee is not received with this form, the KSONA-1 will be returned.                                       |  |



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 May 02, 2011

Re: TINDLE #A-1

API 15-205-27398-00-00

12-30S-13E, 4620 FSL 1980 FEL WILSON 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 October 29, 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