## 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 #: 34179	77007 20 002777R00 1770	API No. 15 - 163-03215 2000	
Name: Thomas M. Brown, LLC		If pre 1967, supply original completion date:	
Address 1: _ P.O. Box 250	,	Spot Description:	
		Ne_Se_Se_ Sec. 12 Twp. 9 S. R. 18 ☐ East	] West
Address 2:	zip: 67663 +	1,320 Feet from North / South Line of S	
Contact Person: Jake Brown		Peet Holl ▼ East / West Line of 3	ection
Phone: (785) 737-7070	<i></i>	Footages Calculated from Nearest Outside Section Corner:  NE NW SE SW	
		County: Rooks	
		Lease Name: Hilgers Well #: 9	
Check One: ✓ Oil Well Gas Well OG	D&A Cathodic	Water Supply Well Other:	
SWD Permit#:	ENHR Permit #:	Gas Storage Permit #:	
Conductor Casing Size:	_ Set at:	Cemented with:	Sacks
Surface Casing Size: 8 5/8""	Set at: <u>1401</u>	Cemented with: 500	Sacks
Production Casing Size: 5 1/2"	Set at:3456	Cemented with: 150	Sacks
3140'-3143', 3189'-3191', 3244'-3249 CIBP@3434', Open Hole -3460'		4004	
Elevation: 2050 ( G.L./ K.B.) T.D.: 3460	PBTD: <u>3434</u> Anh	nydrite Depth: 1394 (Stone Correl Formation)	
Condition of Well: Good Poor Junk in Hole	Casing Leak at:	erval)	
Proposed Method of Plugging (attach a separate page if addition		er vary	
Per Disrict #4 Office			
<b>~</b>			
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.		s and Regulations of the State Corporation Commission	
Company Representative authorized to supervise plugging o		Obstantilla Man 07000	
Address: P.O. Box 250	City: <u></u>	Plainville State: Ks zip: 67663 +	
Phone: (785) 737-7070		Alliad Compating	
Plugging Contractor License #: 99996	Name:	Allied Cementing	
Address 1: P.O. Box 31	Addres		
City: Russell		State: Ks zip: 67665 +	
Phone: ( 785 ) 483-2627	0.1	1,-	
Proposed Date of Plugging (if known): ASAD	4 A 12/02	110	
	annual by Operator on Accord	<u> </u>	
Payment of the Plugging Fee (K.A.R. 82-3-118) will be gu		= IM REPENIE	P~
Date: 12-01-2010 Authorized Operator / Agen		(Signature)	
W 84 - 1/00 October	undian Division 130 & Market	- Room 2078 Wichita Kansas 67202 DEC 06 20	าเก

KCC WICHITA

CERT KANS!

DIVISION

Form KSONA-1 July 2010 orm Must Be Typed Form must be Signed All blanks must be Filled

KCC WICHITA

This form must be submitted wit T-1 (Request for Change of Oper

l); CB-1 (Cathodic Protection Borehole Intent); Permit); and CP-1 (Well Plugging Application).

Any such form submitted without an accompanying Form KSONA-1 will be returned.

Name: Intollias Ivi. Blown; ELC  Address 1: P.O. Box 250  Courty: Rooks  Courty: Rooks  Courty: Plainville  State: Ks	34179	Mall Looking
Address 1: P.O. Box 250  Address 2: Lease Name: Hilgers Well \$: 9  Contact Person: Jake Brown  Filing a Form 7:1 for multiple wells on a lease, enter the legal description of the lease below.  Surface Owner Information:  Name: Jake Hilgers Revocable Trust C/o Stephen A. Hilgers  Address 1: 900 Turkey Creek Dr  McPherson State: Ks zip: 67460 +  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, Form CB-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 this information to the surface owner(s). I acknowledge that, because I have not provided this information to the surface owner(s). To miligate the additional cost of the KCC performing this task, I acknowledge that I am being charged a \$30.00 handling fee with this form. If the fee is not received with this form, the KCC with the statements made herein are true and correct to the best of my knowledge and belief.  Date: 12-01-2010  Signature of Operator or Agent:  Title: Manager	OPERATOR: License # 34179 Thomas M. Brown, LLC	Well Location:  Ne Se Se Soc 12 Two 9 S 5 18 Fact 1 Wast
Address 2:  City: Plainville  State: Ks Zip: 67663 +		County Rooks
City: Plainville  State: Ks zip: 67663 +		Lease Name: Hilgers Well #: 9
Contact Person:    Name:   785   737-7070   Fax: {		
Phone: ( 785 ) 737-7070 Fax: ( )    Email Address:   Surface Owner Information:  Name: Jack E Hilgers Revocable Trust C/o Stephen A. Hilgers  Address 1: 900 Turkey Creek Dr  Address 2:   State: Ks   Zip: 67460    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:		
Email Address:    Surface Owner Information:   Name: _ Jack E Hiligers Revocable Trust C/o Stephen A. Hilgers   Address 1: 900 Turkey Creek Dr		
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CANSAS CORPORATION COMMISSION
OIL'& GAS CONSERVATION DIVISION

# 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 #	Well Location:
Name: Thomas M. Brown, LLC	Ne_Se_Se_ Sec.12 Twp. 9 S. R. East West
Address 1: P.O. Box 250	County: Rooks
Address 2:	Lease Name: Hilgers Well #: 9
City: Plainville State: Ks Zip: 67663 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of
Contact Person: Jake Brown	the lease below:
City:         Plainville         State:         Ks         Zip:         67663         +           Contact Person:         Jake Brown           Phone:         ( 785 ) 737-7070         Fax: ( )	
Email Address:	• ·
Surface Owner Information:  Name: Jack E Hilgers Revocable Trust C/o Stephen A. Hilgers  Address 1: 900 Turkey Creek Dr	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 2:	county, and in the real estate property tax records of the county treasurer.
Address 2:	
the KCC with a plat showing the predicted locations of lease roads, tank are preliminary non-binding estimates. The locations may be entered on Select one of the following:	the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.
	All Dill 2000 Library would did following to the professional
☑ I certify that, pursuant to the Kansas Surface Owner Notice Acountry 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 beform; and 3) my operator name, address, phone number, fax, and I will be supported by the connection with this form; 2) if the form before, and 3 my operator name, address, phone number, fax, and I will be supported by the connection with this form; 2) if the form before the connection with	cated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form eing filed is a Form C-1 or Form CB-1, the plat(s) required by this
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I hereby certify that the statements made herein are true and correct to	the best of my knowledge and belief.
Date: 12-01-2010 Signature of Operator or Agent:	Title: Manager RECEIVED
	<b>DEC</b> 0 & 2010

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

### CERTIFICATION OF COMPLIANCE WITH THE KANSAS SURFACE OWNER NOTIFICATION ACT CORRECTED &

This form must be submitted with all Forms C-1 (Notice of Intent to Drill); CB-1 (Cathodic Prote/ T-1 (Request for Change of Operator Transfer of Injection or Surface Pit Permit); and CP-1 (V

Borehole Intent): \_gging Application).

Any such form submitted without an accompanying Form KSONA-1 will be ... rned.

34179	Well Location: 19 JB
Thomas M. Brown, LLC	Ne Se Se Sec. 12 Twp. 9 s. Rest West
Iddress 1: P.O. Box 250	County: Rooks
ddress 2:	Lease Name: Hilgers Well #: 9
Ry: Plainville State: Ks zip: 67663 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:
hone: ( 785 ) 737-7070 Fax: ( )	W. A.
mail Address:	•
urface Owner Information: aine: Jack E Hilgers Revocable Trust C/o Stephen A. Hilgers	When filing a Form T-1 involving multiple surface owners, attach an additional
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State: Zip:	
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Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichlta, Kansas 67202

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