

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 #: 30582  
Name: MWK PETROLEUM CO.  
Address 1: 508 STONE LAKE CT  
Address 2:  
City: AUGUSTA State: KS Zip: 67010 +  
Contact Person: MIKE KISER  
Phone: (316 ) 775-5496

API No. 15 - 15015-20728-0000  
If pre 1967, supply original completion date:  
Spot Description: SW/4  
NE SW SE SW Sec. 3 Twp. 28 S. R. 6  East  West  
400 Feet from  North /  South Line of Section  
3,450 Feet from  East /  West Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
 NE  NW  SE  SW  
County: BUTLER  
Lease Name: BLAKEMAN Well #: 7 SOUTH

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: 186 Cemented with: 125 Sacks  
Production Casing Size: 5 1/2" Set at: 3034 Cemented with: 75 Sacks

List (ALL) Perforations and Bridge Plug Sets:

OPEN HOLE TO 3039'

Elevation: 1370 ( G.L. /  K.B.) T.D.: 3039 P.B.T.D.: 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):

SET BOTTOM PLUG, FILL OPEN HOLE PLUS 50' THEN 5 SACKS OF CEMENT. PULL CASING, PUMP CEMENT FROM 250' TO SURFACE

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 Rules and Regulations of the State Corporation Commission

Company Representative authorized to supervise plugging operations: MIKE KISER  
Address: 508 STONE LAKE CT. City: AUGUSTA State: KS Zip: 67010 +  
Phone: (316 ) 775-5496  
Plugging Contractor License #: 31925 Name: QUALITY WELL SERVICE, INC.  
Address 1: 190TH US 56 HWY Address 2:  
City: ELLINWOOD State: KS Zip: 67526 +  
Phone: (620 ) 727-3410  
Proposed Date of Plugging (if known): ASAP

Payment of the Plugging Fee (K.A.R. 82-3-118) will be guaranteed by Operator or Agent

Date: 11/3/2010 Authorized Operator / Agent: (Signature) *kw*

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

RECEIVED  
APR 21 2011  
KCC WICHITA

CORRECTED K. FOLLO

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 # 30582  
Name: MWK PETROLEUM CO.  
Address 1: 508 STONE LAKE CT  
Address 2:  
City: AUGUSTA State: KS Zip: 67010  
Contact Person: MIKE KISER  
Phone: (316) 775-5496 Fax: (316) 775-5498  
Email Address:

Well Location: mwk 4/19/11  
SE SW<sup>1</sup> Sec. 3 Twp. 28 S. R. 6  East  West  
County: BUTLER  
Lease Name: BLAKEMAN Well #: 7 SOUTH

If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:

Surface Owner Information:

Name: LEONA E. STRAIT  
Address 1: %SYDNEY K. BEAM  
Address 2: 117 S. MOUND ST.  
City: PRATT State: KS Zip: 67124

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:

mwk 4/19/11  
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 fee with this form. If the fee is not received with this form, the KSONA-1 form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-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: 4/13/2010  
4/19/11 Signature of Operator or Agent: Michael W. Kiser Title: Owner

RECEIVED  
APR 21 2011  
KCC WICHITA

INCOMP. KSONA-1.  
PEND.

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 # 30582  
Name: MIKE KISER MWPK PETROLEUM CO.  
Address 1: 508 STONE LAKE CT  
Address 2: \_\_\_\_\_  
City: AUGUSTA State: KS Zip: 67010 +  
Contact Person: MIKE KISER  
Phone: (316) 775-5496

API No. 15 - 15015-20728 6000  
If pre 1967, supply original completion date: \_\_\_\_\_  
Spot Description: SW#4  
NE SW SE SW Sec. 3 Twp. 28 S. R. 6  East  West  
400 Feet from  North /  South Line of Section  
3,450 Feet from  East /  West Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
 NE  NW  SE  SW  
County: BUTLER  
Lease Name: BLAKEMAN Well #: 7 SOUTH

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: 186 Cemented with: 125 Sacks  
Production Casing Size: 5 1/2" Set at: 3034 Cemented with: 75 Sacks

List (ALL) Perforations and Bridge Plug Sets:

OPEN HOLE TO 3039'

Elevation: 1370 ( G.L. /  K.B.) T.D.: 3039 PBTD: \_\_\_\_\_ Anhydrite Depth: \_\_\_\_\_  
(Stone Coral 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):

SET BOTTOM PLUG, FILL OPEN HOLE PLUS 50' THEN 5 SACKS OF CEMENT. PULL CASING, PUMP CEMENT FROM 250' TO SURFACE

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 Rules and Regulations of the State Corporation Commission

Company Representative authorized to supervise plugging operations: MIKE KISER

Address: 508 STONE LAKE CT. City: AUGUSTA State: KS Zip: 67010 +

Phone: (316) 775-5496

Plugging Contractor License #: 31925 Name: QUALITY WELL SERVICE, INC.

Address 1: 190TH US 56 HWY Address 2: \_\_\_\_\_

City: ELLINWOOD State: KS Zip: 67526 +

Phone: (620) 727-3410

Proposed Date of Plugging (if known): ASAP

Payment of the Plugging Fee (K.A.R. 82-3-118) will be guaranteed by Operator or Agent

Date: 11/3/2010 Authorized Operator / Agent: Michael Kiser (Signature)

RECEIVED

NOV 05 2010

INCOMPLETE FORM

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 # 30582  
Name: MWK PETROLEUM CO.  
Address 1: 508 STONE LAKE CT  
Address 2:  
City: AUGUSTA State: KS Zip: 67010 +  
Contact Person: MIKE KISER  
Phone: ( 316 ) 775-5496 Fax: ( 316 ) 775-5498  
Email Address:

Well Location:  
Sec. 3 Twp. 28 S. R. 6  East  West  
County: BUTLER  
Lease Name: BLAKEMAN Well #: 7 SOUTH

*If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:*

**Surface Owner Information:**

Name: LEONA E. STRAIT  
Address 1: %SYDNEY K. BEAM  
Address 2: 117 S. MOUND ST.  
City: PRATT State: KS Zip: 67124 +

*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 fee with this form. If the fee is not received with this form, the KSONA-1 form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-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: 11/3/2010 Signature of Operator or Agent: Michael W. Kiser Title: Owner

RECEIVED

NOV 05 2010

KCC WICHITA



CORPORATION COMMISSION

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

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

KISER, MICHAEL DBA MWK PETROLEUM CO.  
508 STONE LK CT  
AUGUSTA, KS 67010-2399

May 03, 2011

Re: BLAKEMAN SOUTH #7  
API 15-015-20728-00-00  
3-28S-6E, 400 FSL 3450 FEL  
BUTLER 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 30, 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  
Production Department Supervisor

District: #2  
3450 N. Rock Road, Suite 601  
Wichita, KS 67226  
(316) 630-4000