

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL PLUGGING APPLICATION
Please TYPE Form and File ONE Copy

INCORRECT KSONA-1
FORMS.. PEND. TIC
CORRECTED FORMS
RE CD.

Form CP-1
March 2009
This Form must be Typed
Form must be Signed
All blanks must be Filled

OPERATOR: License #: 5150
Name: COLT ENERGY, INC
Address 1: P O BOX 388
Address 2: _____
City: IOLA State: KS Zip: 66749 + _____
Contact Person: DENNIS KERSHNER
Phone: (620) 365-3111

API No. 15 - 001-22150-0000
If pre 1967, supply original completion date: _____
Spot Description: _____
N/2' NE NW Sec. 24 Twp. 25 S. R. 19 East West
~~6,000~~ 4620 Feet from North / South Line of Section
~~2,000~~ 2770 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: ALLEN
Lease Name: WOLFE Well #: RW36

KC
n

Check One: Oil Well Gas Well OG D&A Cathodic Water Supply Well Other: _____
 SWD Permit #: _____ ENHR Permit #: E-10334 Gas Storage Permit #: _____
Conductor Casing Size: NONE Set at: NONE Cemented with: NONE Sacks
Surface Casing Size: 6 1/4 Set at: 50 Cemented with: 50 Sacks
Production Casing Size: 2 7/8 Set at: 889 Cemented with: 130 Sacks

List (ALL) Perforations and Bridge Plug Sets:
PERFS 840-842 & 850-858

Elevation: NA (G.L. / K.B.) T.D.: 889886 P.B.T.D.: 886 Anhydrite Depth: NONE
(Stone Corral Formation)

Condition of Well: Good Poor Junk in Hole Casing Leak at: NA(FAILED MIT)
(Interval)

Proposed Method of Plugging (attach a separate page if additional space is needed):

RIH W/1" TGB TO BTM, FILL CSG W/CMT, POOH, "TOP OFF" CSG W/CMT, THEN PRESSURE SQUEEZE CMT, SHUT WELL IN, RETURN AT A LATER DATE, CUT OFF CSG BELOW PLOW DEPTH

Is Well Log attached to this application? Yes No Is ACO-1 filed? Yes No
If ACO-1 not filed, explain why:

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MAY 23 2011

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: REX R. ASHLOCK
Address: P O BOX 388, 1112 RHODE ISLAND RD City: IOLA State: KS Zip: 66749 + 0338
Phone: (620) 365-3111
Plugging Contractor License #: 5491 Name: W-W PRODUCTION CO, GENERAL PARTNERSHIP
Address 1: 1150 HWY 39 Address 2: _____
City: CHANUTE State: KS Zip: 66726
Phone: (620) 431-4137

KCC WICHITA

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Proposed Date of Plugging (if known): SON OR AROUND 6/2/2011

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

Date: 5-18-11 Authorized Operator/Agent: Shirley Stotler Production Clerk
(Signature)

KCC WICHITA

INCDR. SPDT. FORM
MAY BE CORRECTED BY
OPER. KCM
7/23/11

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

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

**CERTIFICATION OF COMPLIANCE WITH THE
KANSAS SURFACE OWNER NOTIFICATION ACTS**

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 # 5150
Name: COLT ENERGY, INC
Address 1: P O BOX 388
Address 2: 1112 RHODE ISLAND RD
City: IOLA State: KS Zip: 66749 + 0388
Contact Person: DENNIS KERSHNER
Phone: (620) 365-3111 Fax: (620) 365-3170
Email Address: dennis@aceks.com

Well Location:
N/2 NE NE NW Sec. 24 Twp. 25 S. R. 19 East West
County: ALLEN
Lease Name: WOLFE Well #: RW36

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

Surface Owner Information:

Name: MARVIN E. BOYER OIL COMPANY
Address 1: P O BOX 625
Address 2: _____
City: IOLA State: KS Zip: 66749 + 0388

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: 5-18-11 Signature of Operator or Agent: Shirley Stotler Title: Production Clerk

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MAY 23 2011

CORRECTED KSONA-1.

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

WJ

Form KSONA-1

July 2010

Form Must Be Typed

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**CERTIFICATION OF COMPLIANCE WITH THE
KANSAS SURFACE OWNER NOTIFICATION ACT**

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Select the corresponding form being filed: C-1 (Intent) CB-1 (Cathodic Protection Borehole Intent) T-1 (Transfer) CP-1 (Plugging Application)

OPERATOR: License # 5150
Name: COLT ENERGY, INC
Address 1: P O BOX 388
Address 2: 1112 RHODE ISLAND RD
City: IOLA State: KS Zip: 66749 + 0388
Contact Person: DENNIS KERSHNER
Phone: (620) 365-3111 Fax: (620) 365-3170
Email Address: dennis@aceks.com

Well Location: 5-24-11
N/2 NE NE NW Sec. 24 Twp. 25 S. R. 19 East West
County: ALLEN
Lease Name: WOLFE Well #: RW36

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

Surface Owner Information:

Name: MARVIN E. BOYER OIL COMPANY
Address 1: P O BOX 625
Address 2: _____
City: IOLA State: KS Zip: 66749 + 0338

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.

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- 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.

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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: 5-18-11 Signature of Operator or Agent: Shuley Stotler Title: Production Clerk
5-24-11 Shuley Stotler

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MAY 27 2011

CORRECTED KSONA-1.

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form KSONA-1
July 2010
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CERTIFICATION OF COMPLIANCE WITH THE
KANSAS SURFACE OWNER NOTIFICATION ACT

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Select the corresponding form being filed: C-1 (Intent) CB-1 (Cathodic Protection Borehole Intent) T-1 (Transfer) CP-1 (Plugging Application)

OPERATOR: License # 5150
Name: COLT ENERGY, INC
Address 1: P O BOX 388
Address 2: 1112 RHODE ISLAND RD
City: IOLA State: KS Zip: 66749 + 0388
Contact Person: DENNIS KERSHNER
Phone: (620) 365-3111 Fax: (620) 365-3170
Email Address: dennis@aceks.com

Well Location: 885-24-11
N/2 NE NE NW Sec. 24 Twp. 25 S. R. 19 East West
County: ALLEN
Lease Name: WOLFE Well #: RW36

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

Surface Owner Information:

Name: ROBERT M & MARY ANNA HANEYLLVG TR MARY ANNA HANEY TRS
Address 1: P O BOX 225
Address 2: _____
City: IOLA State: KS Zip: 66749 + 0338

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:

885-24-11
 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.

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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: 5-18-11 Signature of Operator or Agent: Shirley Stotler Title: Production Clerk
5-24-11 Shirley Stotler

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KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

INCOR. SPOT. TOPON
M/B CORRECTED BY
DEX
Form KSONA-1
July 2010
Form Must Be Typed
Form must be Signed
All blanks must be Filled
5/23/11

**CERTIFICATION OF COMPLIANCE WITH THE
KANSAS SURFACE OWNER NOTIFICATION ACT**

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Select the corresponding form being filed: C-1 (Intent) CB-1 (Cathodic Protection Borehole Intent) T-1 (Transfer) CP-1 (Plugging Application)

OPERATOR: License # 5150
Name: COLT ENERGY, INC
Address 1: P O BOX 388
Address 2: 1112 RHODE ISLAND RD
City: IOLA State: KS Zip: 66749 + 0388
Contact Person: DENNIS KERSHNER
Phone: (620) 365-3111 Fax: (620) 365-3170
Email Address: dennis@aceks.com

Well Location:
N/2 NE NE NW Sec. 24 Twp. 25 S. R. 19 East West
County: ALLEN
Lease Name: WOLFE Well #: RW36

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

Surface Owner Information:

Name: ROBERT M & MARY ANNA HANEYLLVG TR MARY ANNA HANEY TRS
Address 1: P O BOX 225
Address 2:
City: IOLA State: KS Zip: 66749 + 0338

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:

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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: 5-18-11 Signature of Operator or Agent: Shirley Stotler Title: Production Clerk

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COLLECTED KSONA-1.

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

1002

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**

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Select the corresponding form being filed: C-1 (Intent) CB-1 (Cathodic Protection Borehole Intent) T-1 (Transfer) CP-1 (Plugging Application)

OPERATOR: License # 5150
Name: COLT ENERGY, INC
Address 1: P O BOX 388
Address 2: 1112 RHODE ISLAND RD
City: IOLA State: KS Zip: 66749 + 0388
Contact Person: DENNIS KERSHNER
Phone: (620) 365-3111 Fax: (620) 365-3170
Email Address: dennis@aceks.com

Well Location: 285-24-11
N/2 NE NE NW Sec. 24 Twp. 25 S. R. 19 East West
County: ALLEN
Lease Name: WOLFE Well #: RW36

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

Surface Owner Information:

Name: HAROLD D YOKUM TRUST
Address 1: 15 N BUCKEYE ST
Address 2: _____
City: IOLA State: KS Zip: 66749 + 0338

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:

285-24-11

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.

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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: 5-18-11 Signature of Operator or Agent: Shirley Stotler Title: Production Clerk
5-24-11 Shirley Stotler

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MAY 27 2011

INCOX SPOT. SPOT MBE
COLLECTED BY OPER.

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form KSONA-1

July 2010

Form Must Be Typed

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Select the corresponding form being filed: C-1 (Intent) CB-1 (Cathodic Protection Borehole Intent) T-1 (Transfer) CP-1 (Plugging Application)

OPERATOR: License # 5150
Name: COLT ENERGY, INC
Address 1: P O BOX 388
Address 2: 1112 RHODE ISLAND RD
City: IOLA State: KS Zip: 66749 + 0388
Contact Person: DENNIS KERSHNER
Phone: (620) 365-3111 Fax: (620) 365-3170
Email Address: dennis@aceks.com

Well Location:
N/2: NE NE NW Sec. 24 Twp. 25 S. R. 19 East West
County: ALLEN
Lease Name: WOLFE Well #: RW36

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

Surface Owner Information:

Name: HAROLD D YOKUM TRUST
Address 1: 15 N BUCKEYE ST
Address 2: _____
City: IOLA State: KS Zip: 66749 + 0388

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Date: 5-18-11 Signature of Operator or Agent: Shirley Stotler Title: Production Clerk

RECEIVED
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KCC WICHITA

CORRECTED KSONA-1.

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

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Phone: (620) 365-3111 Fax: (620) 365-3170
Email Address: dennis@aceks.com

Well Location: SS-24-11
N/2 NE NE NW Sec. 24 Twp. 25 S. R. 19 East West
County: ALLEN
Lease Name: WOLFE Well #: RW36

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

Surface Owner Information:

Name: BETTY I YOKUM TRUST
Address 1: 15 N BUCKEYE ST
Address 2: _____
City: IOLA State: KS Zip: 66749 + 0338

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SS-24-11
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Date: 5-18-11 Signature of Operator or Agent: Shirley Stotler Title: Production Clerk
5-24-11 Shirley Stotler

RECEIVED

MAY 27 2011

KCC WICHITA

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

INCOR. SPOT. FORM
MAY BE CORRECTED BY OPER.
KCC
MAY 23 11
Form KSONA-1
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Select the corresponding form being filed: C-1 (Intent) CB-1 (Cathodic Protection Borehole Intent) T-1 (Transfer) CP-1 (Plugging Application)

OPERATOR: License # 5150
Name: COLT ENERGY, INC
Address 1: P O BOX 388
Address 2: 1112 RHODE ISLAND RD
City: IOLA State: KS Zip: 66749 + 0388
Contact Person: DENNIS KERSHNER
Phone: (620) 365-3111 Fax: (620) 365-3170
Email Address: dennis@aceks.com

Well Location:
N/2 NE NE NW Sec. 24 Twp. 25 S. R. 19 East West
County: ALLEN
Lease Name: WOLFE Well #: RW36

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

Surface Owner Information:
Name: BETTY I YOKUM TRUST
Address 1: 15 N BUCKEYE ST
Address 2: _____
City: IOLA State: KS Zip: 66749 + 0338

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: 5-18-11 Signature of Operator or Agent: Shirley Stotler Title: Production Clerk

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MAY 23 2011
KCC WICHITA



May 24, 2011

ATTN: Maggie
KCC Conservation Division
130 S Market, Room 2078
Wichita, KS 67202

RE: Kansas Surface Owner Notification Act form KSONA-1
Wolfe RW36 Correction on Spot Location

Dear Maggie:

Enclosed please find the corrected copies of the Kansas Surface Owner Notification Act form KSONA-1 for the Wolfe RW36 to the respective surface owners for this well. I have sent each one of them a corrected copy also.

If you have any questions please contact me at 620-365-3111

Thank you,

Sincerely,
COLT ENERGY, INC.

A handwritten signature in cursive script that reads "Shirley Stotler".

Shirley Stotler
Production Clerk
Encl.

RECEIVED

MAY 27 2011

KCC WICHITA

Corporate Office

P.O. Box 388 - 1112 Rhode Island Rd.
Iola, Kansas 66749-0388
Phone (620) 365-3111 Fax (620) 365-3170

Kansas City Office

4330 Shawnee Mission Pkwy, Suite 233
Fairway, Kansas 66205-2522
Phone (913) 236-0016 Fax (913) 262-0058

MIT. ok at 920 P.S.J.
6/3/91 C.P.T.

MIT tests ran
3-23-87

5060 ft. S.L.
3300 ft. E.L.

MARVIN E. BOYER OIL COMPANY
DRILLERS LOG

Started June 18, 1979
Finished June 22, 1979

Wolfe #RW36
220' South of North Line
660 West of East Line

Set 50 feet of surface pipe cemented in.

NE 1/4 NE 1/4 NW 1/4
24-25-19

TOP	BOTTOM	FORMATION	AMOUNT
0	2	Top Soil	2
2	6	Clay	4
6	9	Lime, Broken	3
9	35	Lime	25
35	60	Shale Sandy	25
60	68	Lime Broken	8
68	110	Shale	42
110	133	Sandy Shale	23
133	193	Lime	60
193	200	Shale Dark	7
200	202	Lime	2
202	206	Shale	4
206	224	Lime	18
204	226	Shale Dark	2
226	233	Lime	7
233	235	Shale	2
235	262	Lime	27
262	386	Shale Sandy	124
386	391	Shale Dark	5
391	436	Sandy Shale	45
436	437	Shale Dark	1
437	460	Lime Broken Shale	23
460	475	Lime	15
475	492	Shale Light Green	14
492	496	Sandy shale	4
496	508	Sandy Shale Light Odor	12
508	548	Sandy Shale	40
548	550	Lime Brown	2
550	558	Shale Dark	8
558	615	Shale Dark	30
615	623	Sandy Shale	8
623	642	Lime	19
642	648	Shale Dark	6
648	663	Shale Limey	15
663	673	Shale Dark	10
673	679	Shale Light	6
679	717	Shale Dark	38
717	728	Sandy Shale Light	11
728	739	Shale Dark	11
739	765	Shale Sandy Dark	26
765	778	Sandy Shale Light	13
778	783	Shale Dark	5
783	811	Sandy Shale Limey	28
811	824	Shale Dark	13
824	841	Sandy Shale	17

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Page #2
Drillers Log
Wolfe RW36

TOP	BOTTOM	FORMATION	AMOUNT
841	843	Sand Oil Show	2
STARTED CORING AT 843			
843	844	Sand Good	1
844	853	Shale	9
853	862	Sand Good	9
862	863	Coal and Shale	1
REAMED HOLE AND STARTED DRILLING			
863	889	Shale Dark	26

TD 889

Ran new 2" line pipe with 2x1 bell reducer on bottom. Bottom seating nipple set at 884 and top seating nipple set at 838. One centralizer set below and one above sand and one around 450. Tubbing was hung on clamps 6" off bottom and cemented to top with 130 sacks of regular cement.

April 2, 1987

Adams Jetwell logged and perforated. Seating nipple at 835.5'
Perforated from 840 to 842 with 2 shots, perforated from 850 to 858 with 9 shots evenly spaced. Spotted 15 gallons of 30% acid on perforations through 1" pipe.

New TD 860.5

April 9, 1987

Broke well at 400 psi and took 2 sacks of 20/40, 10 sacks 20/30 and 3 sacks of 8/16 sand at 1400 to 1450 psi. Flushed and dropped 6 balls and pressure went to 1600 psi. Took 2 sacks 20/40, 13 sacks 20/30 and 3 sacks 8/16 sand at 1500 to 1550 psi. Flushed with 10 bbl. oil and closed in at 500 psi. Took 12 minutes from brake to shut in, 5 bbl. per min. Ran 1" pipe to bottom and washed out frac sand and balls. Ran new chrome lined brass pump and used 1" pipe with 20' of 3/4" plastic anchor.

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MAY 23 2011
KCC WICHITA



April 19, 2011

KCC
Conservation Division
130 S Market Room 2078
Wichita, KS 67202

RE: Well Plugging Application form CP-1
Certification of Compliance With The Kansas
Surface Owner Notification Act form KSONA-1
Multiple Leases And Locations

To Whom It May Concern:

Enclosed find copies of Well Plugging Application form CP-1 & Certification Of
Compliance With The Kansas Surface Owner Notification Act form KSONA-1 from Colt
Energy, Inc on the following wells in Allen, Anderson & Montgomery County, Kansas:

Allen

1 Knox RW28 2 Wolfe 45 3 Wolfe RW36

Anderson

4 Colgin 1 5 Colgin 2 6 Colgin 3 7 Lay 1 8 Lay 2 9 Lay 3 10 Lay 4
11 Spencer 1 12 Spencer 2 13 Spencer 3 WDW 14 Spencer 4

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MAY 23 2011
KCC WICHITA

Corporate Office

P.O. Box 388 - 1112 Rhode Island Rd.
Iola, Kansas 66749-0388
Phone (620) 365-3111 Fax (620) 365-3170

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Fairway, Kansas 66205-2522
Phone (913) 236-0016 Fax (913) 262-0058

Page 2
KCC
CONSERVATION DIVISION

Montgomery,

15
Darby 18

I have sent required copies to the land owners and to Dist #3 office

If you have any questions, contact me at 620-365-3111.

Sincerely,
COLT ENERGY, INC

Shirley Stotler

Shirley Stotler
Production Clerk
Encl.
Cc: Dist 3 Office

RECEIVED
MAY 23 2011
KCC WICHITA



CORPORATION COMMISSION

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

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

COLT ENERGY INC
PO BOX 388
IOLA, KS 66749-0388

May 23, 2011

Re: WOLFE #RW-36
API 15-001-22150-00-00
24-25S-19E, 4620 FSL 2970 FEL
ALLEN 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 November 19, 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: #3
1500 W. 7th
Chanute, KS 67220
(620) 432-2300