

15-011-01227-00-02

Notice: Fill out COMPLETELY
and return to Conservation Division at
the address below within
60 days from plugging date.

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CP-4

March 2009

Type or Print on this Form

Form must be Signed

All blanks must be Filled

WELL PLUGGING RECORD

K.A.R. 82-3-117

OPERATOR License #: 33723
Name: Charles E See dba See O.I. Co
Address 1: PO Box 97
Address 2: 315 W. Washington
City: Starke State: Ks Zip: 66720-0097
Contact Person: Charles E See
Phone: (620) 754-3939
Type of Well: (Check one) ☒ Oil Well ☐ Gas Well ☐ OG ☐ D&A ☐ Cathodic
☐ Water Supply Well ☐ Other: ☐ SWD Permit #: ☐ ENHR Permit #: ☐ Gas Storage Permit #: ☐
Is ACO-1 filed? ☐ Yes ☐ No If not, is well log attached? ☐ Yes ☐ No
Producing Formation(s): List All (If needed attach another sheet)

API No. 15 - #70043 (Replugging)
Spot Description: N2, N2, N2, NW Sec. 19 Twp. 27 S. R. 22 ☒ East ☐ West
2600 Feet from ☐ North / ☒ South Line of Section
3900 Feet from ☒ East / ☐ West Line of Section
Footages Calculated from Nearest Outside Section Corner:
☐ NE ☐ NW ☐ SE ☐ SW
County: Bourbon
Lease Name: Shineman Well # SHN, 11-0W
Date Well Completed: 10/30 AM 6-6-11
The plugging proposal was approved on: 11:00 AM (Date)
by: (KCC District Agent's Name)
Plugging Commenced: 10/30 AM 6-6-11
Plugging Completed: 11:00 AM

Show depth and thickness of all water, oil and gas formations.

Oil, Gas or Water Records		Casing Record (Surface, Conductor & Production)			
Formation	Content	Casing	Size	Setting Depth	Pulled Out

Describe in detail the manner in which the well is plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. If cement or other plugs were used, state the character of same depth placed from (bottom), to (top) for each plug set.

Run 1" down backside 2" 500', pumped 65 sacks Cement
(Replugging)

Plugging Contractor License #: 33749 Name: Repy Well Service
Address 1: 19245 Ford Road Address 2:
City: Chanute State: Ks Zip: 66720
Phone: (620) 431-9212
Name of Party Responsible for Plugging Fees: See
State of Ks County: Bourbon, ss. Charles E See
(Print Name) ☐ Employee of Operator or ☒ Operator on above-described well,

being first duly sworn on oath, says: That I have knowledge of the facts statements, and matters herein contained, and the log of the above-described well is as filed, and the same are true and correct, so help me God.

Signature: Charles E See

RECEIVED

JUL 13 2011

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

KCC WICHITA

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KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

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

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

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 # 32723
Name: Charles E See
Address 1: PO Box 97
Address 2: 315 N. Washington
City: Stank State: Ks Zip: 66775-0097
Contact Person: Charles E See
Phone: (620) 754-3939 Fax: ()
Email Address: _____

Well Location:
Sec. 19 Twp. 27 S. R. 22 ☒ East ☐ West
County: Bourbon
Lease Name: Shineman Well #: 11-DW
If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:

Surface Owner Information:

Name: Charles Shineman
Address 1: 110 20th Street
Address 2: _____
City: Walnut State: Ks Zip: 66780

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: 7-6-11 Signature of Operator or Agent: Charles E See Title: Owner/Operator

RECEIVED

JUL 13 2011