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 #: 32278	W	API No. 15 - 163-21,951-00-00	
Name: Tengasco, Inc.	<u></u>	If pre 1967, supply original completion date:	
Address 1: PO Box 458		Spot Description:	
Address 2: 1327 Noose Rd.		NW_NW_SE Sec. 13 Twp. 10 S. R. 18East West	
City: Hays State: KS Zip: 67601 + 9744		2,310 Feet from North / South Line of Section	
Contact Person: Gary Wagner		2,310 Feet from Feet I West Line of Section	
Phone: (785) 625-6374		Footages Calculated from Nearest Outside Section Corner: NE NW SE SW	
		County: Rooks	
		Lease Name: Garvert B Well #: 1	
Check One: Oil Well Gas Well OG	D&A Cathod	lic Water Supply Well Other:	
SWD Permit #:	ENHR Permit #:		
Conductor Casing Size:		<u> </u>	
Surface Casing Size: 8-5/8"	3801	Cemented with:	
· ·	Set at: 3802'	Cemented with: 275 Sacks	
List (ALL) Perforations and Bridge Plug Sets:		Jaka -	
DV @ 1482' w/ 550 sx. CIBP @ 3620 3502-06', 3510-14', 3526-32', 3545-5		95'. 3594-3600'. 3634-42'	
Elevation: 2137 (GL./ KB) T.D.: 3860'			
		(Stone Corral Formation)	
Condition of Well: Good Poor Junk in Hole		Interval)	
Proposed Method of Plugging (attach a separate page if addition	nal space is needed);	,	
As poor KCC recommendations.			
ts Well Log attached to this application? ☐ Yes 🗸 No	Is ACO-1 filed? 🗸 Yes	∏ No	
If ACO-1 not filed, explain why:	iorios i mos. (g. 163		
,			
Plugging of this Well will be done in accordance with K.S	.A. 55-101 <u>et. seq</u> . and the Rul	es and Regulations of the State Corporation Commission	
Company Representative authorized to supervise plugging of	perations: Gary Wagner		
	City:	Hays State: KS Zip: 67601 + 9744	
Phone: (785) 625-6374			
Plugging Contractor License #: 32332	Nam	e: Fischer Well Service	
Address 1: PO Box 773	Addre	ess 2:	
11		State: KS Zip: 67601 + 0773	
Phone: (785) 628-3837			
Proposed Date of Plugging (if known):			
		RECEIVED	
Payment of the Plugging Fee (K.A.R. 82-3-118) will be gua	ranteed by Operator or Agent		
Date: 7-19/11 Authorized Operator / Agent	: <i>-</i>	Hay Dague JUL 2 0 2011	
		I INDENDED A	

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

KCC WICHITA



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.

OPERATOR: License #		
Tengasso Inc	Well Location:	
Name: PO Box 458	NW_NW_SE	
Address 2: 1327 Noose Rd.		
City: Hays State: KS Zip: 67601 + 9744		
Contact Person: Gary Wagner	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:	
Phone: (785) 625-6374 Fax: (785) 625-6241		
Email Address:		
Surface Owner Information:		
Name: Wilfred J. Garvert	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	
Name: Wilfred J. Garvert Address 1: 1107 Dover Dr.		
Address 2:	county, and in the real estate property tax records of the county treasurer.	
City: Salina State: KS Zip: 67401 +		
Select one of the following:	on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.	
owner(s) of the land upon which the subject well is or will be	Act (House Bill 2032), I have provided the following to the surface located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form a being filed is a Form C-1 or Form CB-1, the plat(s) required by this 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 of task, I acknowledge that I am being charged a \$30.00 handling	WNEr(s). To mitigate the additional cost of the KCC performing this	
task, I acknowledge that I am being charged a \$30.00 handlin	wher(s). To mitigate the additional cost of the KCC performing this ig fee, payable to the KCC, which is enclosed with this form.	
task, I acknowledge that I am being charged a \$30.00 handling charged the second option, submit payment of the \$30.00 handling the second option.	wmer(s). To mitigate the additional cost of the KCC performing this g 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.	
task, I acknowledge that I am being charged a \$30.00 handling 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 CF I hereby certify that the statements made herein are true and correct to	wher(s). To mitigate the additional cost of the KCC performing this g 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. To the best of my knowledge and belief.	
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KCC WICHITA



July 19, 2011

Wilfred J. Garvert 1107 Dover Dr. Salina, KS 67401

To Whom It May Concern;

As required by Kansas law, an oil producer must now notify the surface owner prior to a well being plugged. It is Tengasco's intent to plug the Garvert "B" #1 located in the Southeast Quarter (SE4) of Section 13-10S-18W Rooks Co. Please call me if you have any questions.

Thank you,

Gary Wagner

Production Manager

Hay Wagner

Tengasco, Inc.

Office (785)625-6374

Cell (785)735-4124

RECEIVED
JUL 2 0 2011
KCC WICHITA

Form CDP-1 May 2010 Form must be Typed

APPLICATION FOR SURFACE PIT

Submit in Duplicate Operator Name: Tengasco, Inc. License Number: 32278 Operator Address: PO Box 458 Hays, KS 67601 Contact Person: Gary Wagner Phone Number: (785) 625-6374 Lease Name & Well No.: Garvert B #1 Pit Location (QQQQ): . NW . NW . SE Type of Pit: Pit is: Sec. 13 Twp. 10 R. 18 East X West Emergency Pit **Burn Pit** X Proposed Existing Settling Pit Drilling Pit If Existing, date constructed: _Feet from North / X South Line of Section X Workover Pit Haul-Off Pit 2,310 Feet from X East / West Line of Section (If WP Supply API No. or Year Drilled) Pit capacity: 100 Rooks (bbls) Is the pit located in a Sensitive Ground Water Area? Yes X No Chloride concentration: mg/l (For Emergency Pits and Settling Pits only) Is the bottom below ground level? Artificial Liner? How is the pit lined if a plastic liner is not used? X Yes No X Yes No Pit dimensions (all but working pits): Length (feet) Width (feet) N/A: Steel Pits Depth from ground level to deepest point: _ (feet) No Pit If the pit is lined give a brief description of the liner Describe procedures for periodic maintenance and determining material, thickness and installation procedure. liner integrity, including any special monitoring. 6 mil black plastic Distance to nearest water well within one-mile of pit: Depth to shallowest fresh water__ Source of information: 4100 Depth of water well _ measured well owner feet electric log KDWR Emergency, Settling and Burn Pits ONLY: Drilling, Workover and Haul-Off Pits ONLY: Producing Formation: _ Type of material utilized in drilling/workover:_ Number of producing wells on lease: ____ Number of working pits to be utilized: _ Barrels of fluid produced daily:___ Pit emptied and backfilled Abandonment procedure:___ Does the slope from the tank battery allow all spilled fluids to flow into the pit? Yes No Drill pits must be closed within 365 days of spud date. RECEIVED I hereby certify that the above statements are true and correct to the best of my knowledge and belief. JUL 2 0 2011 (Signature of Applicant or Agent 7-19-11 KCC WICHITA Date KCC OFFICE USE ONLY

Permit Date:

Permit Number:

Date Received:

Liner

Steel Pit

RFAS

Lease Inspection: Yes No

Form CDP-1 . May 2010 Form must be Typed

APPLICATION FOR SURFACE PIT

Submit in Duplicate Operator Name: Tengasco, Inc. License Number: 32278 Operator Address: PO Box 458 Hays, KS 67601 Contact Person: Gary Wagner Phone Number: (785) 625-6374 Lease Name & Well No.: Garvert B #1 Pit Location (QQQQ): NW NW SE Type of Pit: Pit is: Emergency Pit Sec. 13 Twp. 10 R. 18 East X West Burn Pit X Proposed Existing Settling Pit Drilling Pit If Existing, date constructed: _Feet from North / X South Line of Section Workover Pit Haul-Off Pit 2,310 Feet from 🔀 East / 🦳 West Line of Section (If WP Supply API No. or Year Drilled) Pit capacity: 100 Rooks (bbis) is the pit located in a Sensitive Ground Water Area? Yes X No Chloride concentration: mg/l (For Emergency Pits and Settling Pits only) Is the bottom below ground level? Artificial Liner? How is the pit lined if a plastic liner is not used? ✓ Yes

✓ No X Yes No 12 Pit dimensions (all but working pits): Length (feet) Width (feet) N/A: Steel Pits Depth from ground level to deepest point: . (feet) No Pit If the pit is lined give a brief description of the liner Describe procedures for periodic maintenance and determining material, thickness and installation procedure. liner integrity, including any special monitoring. 6 mil black plastic Distance to nearest water well within one-mile of pit: Depth to shallowest fresh water_ feet. Source of information: 4100 feet Depth of water well _ measured feet |X | well owner electric log KDWR Emergency, Settling and Burn Pits ONLY: Drilling, Workover and Haul-Off Pits ONLY: Producing Formation: Type of material utilized in drilling/workover: Number of producing wells on lease: ____ Number of working pits to be utilized: Barrels of fluid produced daily:_ Pit emptied and backfilled Abandonment procedure:_ Does the slope from the tank battery allow all spilled fluids to flow into the pit? Yes No Drill pits must be closed within 365 days of spud date. I hereby certify that the above statements are true and correct to the best of my knowledge and belief. JUL 2 0 2011 KCC WICHITA 7-19-11 Date KCC OFFICE USE ONLY Liner Steel Pit RFAS

Permit Date:

Lease Inspection: Yes No

Permit Number:

Date Received: _



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

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

TENGASCO, INC. 1327 NOOSE RD PO BOX 458 HAYS, KS 67601-9744 July 21, 2011

Re: GARVERT B #1

API 15-163-21951-00-00

13-10S-18W, 2310 FSL 2310 FEL ROOKS 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 January 17, 2012. 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

Stur Bond

Production Department Supervisor

District: #4 2301 E. 13th Hays, KS 67601 (785) 625-0550