

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

WELL PLUGGING APPLICATION

Form KSONA-1, Certification of Compliance with the Kansas Surface Owner Notification Act,
MUST be submitted with this form.

Form CP-1

March 2010

This Form must be Typed

Form must be Signed

All blanks must be Filled

OPERATOR: License #: 6044
Name: Stelbar Oil Corporation, Inc.
Address 1: 1625 N. Waterfront Parkway
Address 2: Suite #200
City: Wichita State: KS Zip: 67206 + 6602
Contact Person: Roscoe L. Mendenhall
Phone: (316) 264-8378

API No. 15 - 187-21196-00-00
If pre 1967, supply original completion date: _____
Spot Description: _____
SW/4 SW/4 NE/4 Sec. 29 Twp. 30 S. R. 41 ☐ East ☒ West
2134' Feet from ☒ North / ☐ South Line of Section
2152' Feet from ☒ East / ☐ West Line of Section
Footages Calculated from Nearest Outside Section Corner:
☒ NE ☐ NW ☐ SE ☐ SW
County: Stanton
Lease Name: KU Endowment Well #: 1-29

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: 1549' KB Cemented with: 400 sks. A-con light cement Sacks
Production Casing Size: N/A Set at: _____ Cemented with: 200 sks. Premium cement Sacks
List (ALL) Perforations and Bridge Plug Sets:

3420' GR
Elevation: 3433' KB (☐ G.L. / ☐ K.B.) T.D.: 5510' KB PBTD: _____ 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):
Plug well w/270 sks. cement as follows: 100 sks. @ 1640'; 50 sks. @ 820'; 50 sks. @ 550'; 20 sks. from 60' to surface.
Plugged rathole w/30 sks. and mousehole w/20 sks. All cement was 60/40 pozmix w/4% gel.

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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JUN 17 2011

KCC WICHITA

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: Roscoe L. Mendenhall
Address: 1625 N. Waterfront Parkway, Suite #200 City: Wichita State: KS Zip: 67206 + 6602
Phone: (316) 264-8378
Plugging Contractor License #: 32453 Name: Basic Energy Services, LP
Address 1: 100 S. Main, Suite #607 Address 2: Center Point @ Main Bldg.
City: Wichita State: KS Zip: 67202 + _____
Phone: (316) 262-3699

Proposed Date of Plugging (if known): 06/01/2011 MA 5/31/11

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

Date: 06/10/2011 Authorized Operator / Agent: Roscoe L. Mendenhall (Signature)
(Roscoe L. Mendenhall, Vice-President / Operations for Stelbar Oil Corporation, Inc.)

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

Dist. 1

No Str. - Alr. Plugged

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 # 6044
Name: Stelbar Oil Corporation, Inc.
Address 1: 1625 N. Waterfront Parkway
Address 2: Suite #200
City: Wichita State: KS Zip: 67206 + 6602
Contact Person: Roscoe L. Mendenhall
Phone: (316) 264-8378 Fax: (316) 264-0592
Email Address: roscoe@stelbar.com

Well Location:
SW/4 SW/4 NE/4 Sec. 29 Twp. 30 S. R. 41 ☐ East ☒ West
County: Stanton
Lease Name: KU Endowment Well #: 1-29

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

Surface Owner Information:

Name: Kansas University Endowment Association
Address 1: Attn.: Monte Soukup
Address 2: P.O. Box #928
City: Lawrence State: KS Zip: 66044 + 0928

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: 06/10/2011

Signature of Operator or Agent: Roscoe L. Mendenhall

Roscoe L. Mendenhall
Vice-President / Operations
for Stelbar Oil Corporation, Inc.

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JUN 17 2011