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 #: 33074	API No. 15 - 125-30922-00-00	
Name: Dart Cherokee Basin Operating Co LLC	If pre 1967, supply original completion date:	
Address 1; P O Box 177	Spot Description:	
Address 2:	NE_SW_SW_Sec. 27_Twp. 34_S.	R. 14 VEast West
City: Mason State: MI zip: 48854 + 0177	800 Feet from North	
Contact Person: Beth Oswald	— 4,450 Feet from ✓ East	/ West Line of Section
	Footages Calculated from Nearest Outside	_
Phone: (517) 244-8716	— NE NW ✓ SE Montgomon	-
	County: Montgomery Lease Name: Morrow et al	
	Lease Name:	vveii #:
Check One: ☐ Oit Well	nodic Water Supply Well Other:	
SWD Permit #: ENHR Permit #:	Gas Storage Permit #:	
Conductor Casing Size: Set at:		
Surface Casing Size: 8 5/8" Set at:		
Production Casing Size: 4 1/2" Set at:		
List (ALL) Perforations and Bridge Plug Sets:		
1177' - 1178' 1023' - 1024'		
1045' - 1048' 997' - 999'		
Elevation: 786' (7 GL/ [K.B.) T.D.: 1626' PBTD: 1618'	Anhydrite Denth	
	(Stone Corral F	ormation)
Condition of Well: Good Door Junk in Hole Casing Leak at:	(interval)	
Proposed Method of Plugging (attach a separate page if additional space is needed):	Dootson Inc	
TIH to 1618'. Set cmt plug fr 1618' - surf. Cut off csg.	Restore loc.	
Is Well Log attached to this application? Yes V No Is ACO-1 filed? V Y	es 🔲 No	
If ACO-1 not filed, explain why:		
	Dulas and Danislations of the State Companying C	a mulantan
Plugging of this Well will be done in accordance with K.S.A. 55-101 et. seq. and the Company Representative authorized to supervise plugging operations: Aaron Har		ommission
P O Box 177	Mason State: MI Zip: 4	48854 +
517 244 ₋ 8716	State. 21p	
Filone. \ /	ame: W&W Production	
Plugging Contractor License #: 5491 Address 1: 1150 Hwy 39		
Phone: (.620_) 431-4137	State: KS zip: 6	+
Proposed Date of Plugging (if known): July 11, 2011	***************************************	
Payment of the Plugging Fee (K.A.R. 82-3-118) will be guaranteed by Operator or Ag	ent R	RECEIVED
Date: 6-22-11 Authorized Operator / Agent: Active Do	1//4/	/
Date radiolece operator rigoria	(Signatural 1/1/11)	. เกร. 7 (7 1 1

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 (C	Cathodic Protection Borehole Intent) T-1 (Transfer) CP-1 (Plugging Application)
OPERATOR: License # 33074 Name: Dart Cherokee Basin Operating Co LLC	Well Location:NE_SW_SW_Sec27_Twp34_S. R14
Address 1: P O Box 177	County: Montgomery
Address 2:	Lease Name: Morrow et al Well #: D1-27
City: Mason State: MI Zip: 48854 + 0177 Beth Oswald	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:
Contact Person: Beth Oswald Phone: (517) 244-8716 Fax: (620) 331-7870	
Email Address: _boswald@dartoilandgas.com	
Surface Owner Information:	
Name: David & Karolyn Morrow	When filing a Form T-1 involving multiple surface owners, attach an additional
Name: David & Karolyn Morrow Address 1: 6205 Joseph Drv	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
Address 2:	county, and in the real estate property tax records of the county treasurer.
City: Gransbury State: TX Zip: 76049 +	
	batteries, pipelines, and electrical lines. The locations shown on the plat the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.
	cated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form being filed is a Form C-1 or Form CB-1, the plat(s) required by this
I have not provided this information to the surface owner(s). I ac KCC will be required to send this information to the surface ow task, I acknowledge that I am being charged a \$30.00 handling	ner(s). To mitigate the additional cost of the KCC performing this
If choosing 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 CP-1	fee with this form. If the fee is not received with this form, the KSONA-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: 6-22-11 Signature of Operator or Agent: Abette C	Éswald Title: Engr Support Supvr
	RECEIVED

JUN 27 2011 KCC WICHITA

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form KSONA-1
July 2010
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KCC WICHITA

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OPERATOR: License # 33074	Well Location:
OPERATOR: License # Dart Cherokee Basin Operating Co LLC	NE_SW_SW_Sec27_Twp34_S. R14 [✓] East [_, West
Address 1: P O Box 177	County: Montgomery
Address 2:	Lease Name: Morrow et al Well #: D1-27
City: Mason State: MI Zip: 48854 + 0177	If filing a Form T-1 for multiple wells on a lease, enter the legal description of
Contact Person: Beth Oswald	the lease below:
Phone: (517) 244-8716 Fax: (620) 331-7870	
Email Address: _boswald@dartoilandgas.com	
Surface Owner Information:	
Name: Kenneth Morrow	When filing a Form T-1 involving multiple surface owners, attach an additional
Address 1: 9428 S 60th East Ave	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
Address 2:	county, and in the real estate property tax records of the county treasurer.
City: Tulsa State: OK Zip: 74133 +	
	odic Protection Borehole Intent), you must supply the surface owners and
the KCC with a plat showing the predicted locations of lease roads, tail	odic Protection Borehole Intent), you must supply the surface owners and nk batteries, pipelines, and electrical lines. The locations shown on the plat on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.
the KCC with a plat showing the predicted locations of lease roads, tar are preliminary non-binding estimates. The locations may be entered	nk batteries, pipelines, and electrical lines. The locations shown on the plat
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the KCC with a plat showing the predicted locations of lease roads, tar are preliminary non-binding estimates. The locations may be entered. Select one of the following: I certify that, pursuant to the Kansas Surface Owner Notice 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 CB-1, Form CB-1, Form T-1, or Form being filed is a Form C-1 or Form CB-1, the plat(s) required by this
the KCC with a plat showing the predicted locations of lease roads, tar are preliminary non-binding estimates. The locations may be entered select one of the following: I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be CP-1 that I am filing in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax,	Act (House Bill 2032), I have provided the following to the surface located: 1) a copy of the Form C-1, Form CB-1, the plat(s) required by this and email address. acknowledge that, because I have not provided this information, the powner(s). To mitigate the additional cost of the KCC performing this
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KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

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Name: Date Trible Reter Bash Toperating Co Lec Name: Date Trible Reter Bash Toperating Co Lec Name: Name: Date Retering County Nongomery	OPERATOR: License # 33074	Mall Legation
Address 1: P O Box 177 Address 2: City: Mason State: MI Zip: 48854 + 0177	Dan Unerokee basin Oneranno Co F C	Well Location: NE SW SW Sec. 27 Two 34 S. R. 14 [X Fast] West
City: Mason State: MI Zip: 48854 + 0177 If filing a Form 7-1 for multiple wells on a lease, enter the legal description of the lease below If filing a Form 7-1 for multiple wells on a lease, enter the legal description of the lease below Surface Owner Information: Name: John & Marilyn Black Address 1: 24222 Aspen Drv Address 2: City: Nisswa State: MN Zip: 56468 + If this form is being submitted with a Form C-1 (Inlent) 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 may be entered on the Form C-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; if the form being filed is a Form C-1 or Form CB-1, form CB-1, or Form CP-1 that I am Billing in connection with this form; 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 I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed 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 choosing the second option, submit payment of the \$30.00 handling fee with this form. If the fee is not received with this form. If the Form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be returned. I choosing the second option, submit payment of the \$30.00 handling fee, payable to the KCC, which is enclosed with this form. If the fee is not received w	Name.	County: Montgomery
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Contact Person: Set Doswald 244-8716 Fax: (620) 331-7870 244-8716 Fax: (620) 331-7870	City: Mason State: MI Zip: 48854 + 0177	
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Email Address: boswald@dartollandgas.com Surface Owner Information: Name: John & Marilyn Black Address 1: 24222 Aspen Drv Address 2:	Phone: (517) 244-8716 Fax: (620) 331-7870	
Name: John & Marilyn Black Address 1: 24222 Aspen Drv Address 2:		
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Date: 6-22-11 Signature of Operator or Agent Betta (Sward) Title: Engr Support Supvr RECEIVED	the KCC with a plat showing the predicted locations of lease roads, taken are preliminary non-binding estimates. The locations may be entered Select one of the following: I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be CP-1 that I am filling in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax, I have not provided this information to the surface owner(s). I KCC will be required to send this information to the surface of	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 CB-1, Form CB-1, Form T-1, or Form being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address. acknowledge that, because I have not provided this information, the powner(s). To mitigate the additional cost of the KCC performing this
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Sam Brownback, Governor, Mark Sievers, Chairman, Ward Loyd, Commissioner, Thomas E. Wright, Commissioner

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

DART CHEROKEE BASIN OPERATING CO., LLC 600 DART RD PO BOX 177 MASON, MI 48854-9327

July 07, 2011

Re: MORROW ET AL #D1-27 API 15-125-30922-00-00 27-34S-14E, 800 FSL 4450 FEL MONTGOMERY 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 3, 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

Production Department Supervisor

District: #3 1500 W. 7th

Chanute, KS 67220 (620) 432-2300