## 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 #:33221	API No. 15 - 001-27666 · 00 · 01
Name: Roxanna Pipeline, Inc.	
Address 1: 4600 Greenville Ave., Ste. 200	
Address 2:	SW NE NE SE Sec. 3 Twp. 26 S. R. 18 VEast Wes
City: Daltas State: TX zip: 75206 +	2,145 Feet from North / South Line of Section
Contact Person: _ Carol M. Shiels	495 Feet from 🗸 East / [ ] West Line of Section
Phone: (214 ) 691-6216	Footages Calculated from Nearest Outside Section Corner:
Check One: Oil Well Gas Well OG D&A C	athodic Water Supply Well Other:
	E-24521 Gas Storage Permit #:
Conductor Casing Size: Set at:	
Surface Casing Size: 6 1/4 Set at: 20	
Production Casing Size: 27/8 Set at: 839	
List (ALL) Perforations and Bridge Plug Sets:  NO records	
Elevation: ( GL/ K8) T.D.: PBTD:	Anhydrite Depth: (Stone Corral Formation)
Condition of Well: Good Poor Junk in Hole Casing Leak at:	
Proposed Method of Plugging (attach a separate page if additional space is needed):	(Interval)
Connect pump truck directly to the 2 7/8" casing and p	pump cement into well until it holds pressure.
,	
Is Well Log attached to this application? Yes [X] No Is ACO-1 filed? ["]	Yes No
If ACO-1 not filed, explain why:	
Well was drilled in the mid-80's. Don't know if ACO-1	was ever filed.
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: Tom Gilber Address: 1391 200th Rd	City: Yates Center State: KS Zip: 66783 +
Phone: ( 785 ) 466-1158	State: NO Zip: O0700 +
Plugging Contractor License #: 5491	Name: W & W Production Company
1150 Hway 30	Address 2:
	State: KS zip: 66720 +
Phone; ( )	
Proposed Date of Plugging (if known):	RECEIVED
	$\alpha$
Payment of the Plugging Fee (K.A.R. 82-3-118) will be guaranteed by Operator or A	Agent   AUG 0 1 2011
Date: 7/29/2011 Authorized Operator / Agent:	(Signature)
Mallana 1600 0 11 201 1 1 1 1 1 1 1 1 1 1 1 1 1 1	(Signature) KCC WICHITA

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

## 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

**KCC WICHITA** 

## 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)   X CP-1 (Plugging Application)
OPERATOR: License #	Well Location:  SW NE NE SE Sec.3 Twp. 26 S. R. 18
OPERATOR: License # 33221  Roxanna Pipeline, Inc.	
Address 1: 4600 Greenville Ave., Ste. 200	
Address 2:	
City: Dallas State: TX Zip: 75206 +	
Contact Person:	
Phone: ( ) Fax: ( )	
Email Address:	
Surface Owner Information: Name: Bob Barnett	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.
Address 1: c/o B & W Custom Truck Bed	
Name: Bob Barnett  Address 1: C/o B & W Custom Truck Bed  Address 2: 1216 US Hwy 224	
City: Humboldt State: KS Zip: 66748 +	
the KCC with a plat showing the predicted locations of lease roads, tank are preliminary non-binding estimates. The locations may be entered on Select one of the following:	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.
I certify that, pursuant to the Kansas Surface Owner Notice Acouner(s) of the land upon which the subject well is or will be loced CP-1 that I am filing in connection with this form; 2) if the form be form; and 3) my operator name, address, phone number, fax, and	cated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form eing 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 own task, I acknowledge that I am being charged a \$30.00 handling I	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	ee 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 t	the best of my knowledge and belief.
Date: 7/29/2011 Signature of Operator or Agent: Mac	Title: Geological Asst RECEIVED
(	AUG 0 1 2011