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 - 001-27702 · 00 · 0	<u>)4:</u>
Name: Roxanna Pipeline, Inc.		If pre 1967, supply original completion date:	
Address 1: 4600 Greenville Ave., Ste. 200		Spot Description: NW/4 SE/4	
Address 2:		SW SE NW SE Sec. 3 Twp. 26 S.	
City: Dallas State: TX		1,485 Feet from North /	
Contact Person: Carol M. Shiels		.1,815 Feet from [East /	West Line of Section
Phone: (214) 691-6216		Footages Calculated from Nearest Outside S NE NW SE County: Allen	sw
		Lease Name: N. Finney w	Vell #: 43
Check One: Oil Well Gas Well OG	D&A Cathodic	: Water Supply Well Other:	
——————————————————————————————————————		Gas Storage Permit #: _	
Conductor Casing Size:			
Surface Casing Size:			
Production Casing Size:			
List (ALL) Perforations and Bridge Plug Sets:			
no records are available			
Elevation: 971 (G.L./ K.B.) T.D.:	PBTD: An	hydrite Depth:	
Condition of Well: Good Poor Junk in Hole	Casing Leak at:	(Stone Corral Fo	rmation)
Proposed Method of Plugging (attach a separate page if addition	(Internal space is needed):	terval)	
Connect pump truck directly to the ca		ent into well until it holds pressi	ure.
•		•	
Is Well Log attached to this application? Yes X No	In ACO 1 Florida " You i	Na	
If ACO-1 not filed, explain why:	IS ACO-1 filed? [] fes [_	_, NO	
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	3.A. 55-101 <u>et, seq</u> . and the Rule:	s and Regulations of the State Corporation Cor	mmission
Company Representative authorized to supervise plugging of	perations: Tom Gilbert		
Address: 1391 200th Rd	City: _	Yates Center State: KS Zip: 6	<u>6783</u> +
Phone: (785) 466-1158			
	Name:	Name: W & W Production Company	
Address 1: 1150 Hwy 39		s 2:	
City: Chanute		State: KS Zip: 66	3720 +
Phone: ()			
Proposed Date of Plugging (if known):			
	.01		RECEIVED
Payment of the Plugging Fee (K.A.R. 82-3-118) will be gu	1111/0	with, of	AUG 0 1 2011
Date: 7/29/2011 Authorized Operator / Agen	it:	(Signature)	עמה ה'ן דמוו

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

KCC WICHITA



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.

OPERATOR: License # 33221 Name: Roxanna Pipeline, Inc.	Well Location: SW_SE_NW_SE_Sec.3 Twp. 26 S. R. 18 East West West	
Address 1: 4600 Greenville Ave., Ste. 200 Address 2:	County: Allen	
City: Dallas State: TX zip: 75206 + Contact Person: Fax: () Fax: ()	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:	
Email Address:		
Surface Owner Information: Name: Bob Barnett	IAN-a-Etia-a-Easa-Taliusahiin ahida a	
Address 1: c/o B & W Custom Truck Bed	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 Address 2: 1216 US Hwy 224		
City: Humboldt State: KS Zip: 66748 +		
Select one of the following:	n the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.	
	ocated: 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 acknowledge that I am being charged a \$30.00 handling	mer(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 I will be returned.	
I haraby cartify that the statements made barein are true and correct to	the hest of my knowledge and helief	
I hereby certify that the statements made herein are true and correct to	the best of the knowledge and belief.	
Date: 7/29/2011 Signature of Operator or Agent:		

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