

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 #: 30525
Name: D.S. LANGSTON
Address 1: 310 W. CENTRAL, STE. #202
Address 2: _____
City: WICHITA State: KS Zip: 67202 + _____
Contact Person: D.S. LANGSTON
Phone: (620) 786-0874

API No. 15 - 159-04244-00-00
If pre 1967, supply original completion date: 9/03/1954
Spot Description: _____
SE NE NW Sec. 35 Twp. 20 S. R. 6 East West
000 4291 Feet from ~~_____~~ South Line of Section
2310 3074 Feet from East / ~~_____~~ Line of Section
GPS - KCC
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: RICE
Lease Name: HARDER Well #: A-3

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" Set at: 120' Cemented with: UNK. Sacks
Production Casing Size: 5 1/2 Set at: 3378' Cemented with: UNK. Sacks

List (ALL) Perforations and Bridge Plug Sets:
OPEN HOLE COMPLETION FROM BOTTOM OF CASING STRING @ 3378' TO TD, WITH TOP OF CEMENT PLUG NOW LOCATED @ 3381'
Elevation: 1596 (G.L. / K.B.) T.D.: 3393' P.B.T.D.: 3381' Anhydrite Depth: UNK.
(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):
PER KCC REGULATIONS

Is Well Log attached to this application? Yes No Is ACO-1 filed? Yes No

If ACO-1 not filed, explain why:
AN ACO-1 WAS LIKELY FILED BY STERLING DRLG. BUT WE DON'T HAVE A COPY

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: D.S. LANGSTON
Address: 310 W. CENTRAL, STE. #202 City: WICHITA State: KS Zip: 67202 + _____
Phone: (620) 786-0874
Plugging Contractor License #: 31529 Name: MIKE'S TESTING & SALVAGE, INC.
Address 1: BOX 467 Address 2: _____
City: CHASE State: KS Zip: 56524 + 0467
Phone: (620) 562-8088

Proposed Date of Plugging (if known): AS SOON AS MIKE'S TESTING CAN GET TO IT & SUBJECT TO LANDOWNER PERMISSION

Payment of the Plugging Fee (K.A.R. 82-3-118) will be guaranteed by Operator or Agent
Date: 7/28/2011 Authorized Operator / Agent: _____
(Signature)

RECEIVED
AUG 02 2011
KCC WICHITA

D.S. Langston
Independent Oil & Gas Operator
310 W. Central, Ste.# 202
Wichita, Kansas 67218
Phone: (316) 265-4411
Fax: (316) 263-7820

July 28, 2011

KANSAS CORP. COMMISSION
3450 N. ROCK ROAD, BLDG. 600, STE. 601
WICHITA, KS 67226
ATTN: VIRGIL CLOTHIER

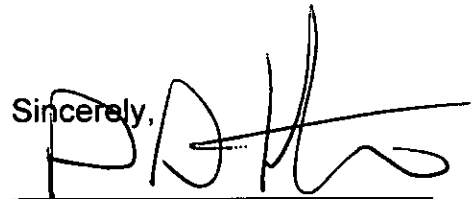
Re: **Well Plugging Application as result of
Denial of Renewal of Temporary Abandonment Well Applications - CP-111**
for the **HARDER #A-3** well
located within the SE NE NW of Sec. 35-20S-6W
API WELL # 15-159-04244-00-00
Rice Co., Kansas

Dear Virgil:

Enclosed please find the Well Plugging Application CP-1 for the above well-bore. I am this same date also sending the landowner a copy of the enclosed Kansas Surface Owner Notification (form KSONAS-1). As indicated on the application, Mike's Testing will conduct the plugging operations and they estimate it may be about 60-90 days before their crew can move onto this plugging location.

Thank you for your consideration and assistance.

Sincerely,



D.S. Langston, Producer #30525

CC: Mike Kelso, President of Mike'S Testing & Salvage, Inc.

RECEIVED

AUG 02 2011

KCC WICHITA

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 # 30525
Name: D.S. LANGSTON
Address 1: 310 W. CENTRAL, STE. #202
Address 2: _____
City: WICHITA State: KS Zip: 67202 + _____
Contact Person: SAME
Phone: (620) 786-0874 Fax: (_____) _____
Email Address: _____

Well Location:
SE NE NW Sec. 35 Twp. 20 S. R. 6 East West
County: RICE
Lease Name: HARDER Well #: A-3

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

Surface Owner Information:

Name: JULIA HARDER
Address 1: 3001 S. BROADACRES RD.
Address 2: _____
City: HUTCHINSON State: KS Zip: 67501 + _____

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: 7/28/2011 Signature of Operator or Agent:  Title: INDEP. O. & G. OPERATOR

RECEIVED
AUG 02 2011