

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 #: 34130
Name: Manns' ATP, Inc.
Address 1: 7865 NW 80th St.
Address 2: _____
City: Potwin State: KS Zip: 67123
Contact Person: Edward Mann
Phone: (620) 752-3200 cell 316-734-8037

API No. 15 - 015-2385800-00
If pre 1967, supply original completion date: _____
Spot Description: _____
N2 SE NE SW Sec. 26 Twp. 24 S. R. 4 East West
1965 Feet from North / South Line of Section
2970 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Butler
Lease Name: Manns' Well #: 6

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: 201 Cemented with: 125 Class A Sacks
Production Casing Size: 4 1/2 Set at: 2698 Cemented with: 210 Sacks
List (ALL) Perforations and Bridge Plug Sets: perforation C 2624-2628

Elevation: 1414 (G.L. / K.B.) T.D.: _____ 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): _____

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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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: Edward Mann
Address: 7865 NW 80th ST City: Potwin State: KS Zip: 67123 + _____
Phone: (620) 752-3200 cell 316-734-8037
Plugging Contractor License #: 5870 Name: Phillips Well Service
Address 1: 315 N Industrial Road Address 2: _____
City: Eldorado Ks State: KS Zip: 67042 + _____
Phone: (316) 321-6650
Proposed Date of Plugging (if known): _____

Payment of the Plugging Fee (K.A.R. 82-3-118) will be guaranteed by Operator or Agent
Date: 7-28-11 Authorized Operator / Agent: Edward Mann

Edward Mann
(Signature)

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 (Cathodic Protection Borehole Intent) T-1 (Transfer) CP-1 (Plugging Application)

OPERATOR: License # 34130
Name: Manns' ATP, Inc.
Address 1: 7865 NW 80th ST
Address 2: _____
City: Potwin State: KS Zip: 67128
Contact Person: Edward Mann
Phone: (620) 752-3200 Fax: (____) _____
cell 316-734-8037
Email Address: _____

Well Location:
N2 SE NE SW 26 Sec. 24 Twp. 4 S. R. 4 East West
County: Butler
Lease Name: Manns' Well #: 6

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

Surface Owner Information:

Name: Manns' ATP, Inc
Address 1: 7865 NW 80th St
Address 2: _____
City: Potwin State: KS Zip: 67123

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: 7-29-11 Signature of Operator or Agent: Edward Mann Title: President

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AUG 01 2011