

CPA

OIL & GAS CONSERVATION DIVISION

WELL PLUGGING APPLICATION

Form KSONA-1, Certification of Compliance with the Kansas Surface Owner Notification Act, FORM. MUST be submitted with this form.

REC'D WICHITA KSONA-1 FORM. PEND. OPER MUST SUBMIT

March 2010

This Form must be Typed

Form must be Signed

All blanks must be Filled

OPERATOR: License #: 34426
Name: AJ's Services
Address 1: PO BOX 1118
Address 2:
City: El Dorado State: KS Zip: 67042
Contact Person: John Brickley
Phone: (316) 322-7478

API No. 15 - 015 19143 0000
If pre 1987, supply original completion date:
Spot Description: NW NE SW
Sec. 32 Twp. 26S R. 5 East West
2310 Feet from North / South Line of Section
3630 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
NE NW SE SW
County: BUTLER
Lease Name: MOLK BROWN Well #: 1A

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: 200 Cemented with: TO SURFACE Sacks
Production Casing Size: 5.5 W/ 4.5 weld liner Set at: 2400 Cemented with: 75 (4.5" crntd to sfc) Sacks

List (ALL) Perforations and Bridge Plug Sets:

Elevation: (GL / K.B.) T.D.: PBTD: Anhydrite Depth: (Stone Coral 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): bottom plug set with 6 sacks cement. top plug set at 300' cement to surface.

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

If ACO-1 not filed, explain why:

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: JOHN BRICKLEY

Address: PO BOX 1118 City: EL DORADO State: KS Zip: 67042

Phone: (316) 322-7478

Plugging Contractor License #: 315538 31538 Name: HADACALL WELL SERVICE

Address 1: 15951 E. 101st N Address 2:

City: BENTON State: KS Zip: 67017

Phone: (316) 799-2210

Proposed Date of Plugging (if known): WEATHER PERMITTING (HOUSE & YARD) ASAP P+A 7/01/11

Payment of the Plugging Fee (K.A.R. 82-3-118) will be guaranteed by Operator or Agent

Date: 04/15/11 Authorized Operator / Agent: John Brickley (Signature)

*1st KSONA - INCOMPLETE. KSONA-1. CANNOT ACCEPT. OPER. Form Must Be Typed Form must be Signed All blanks must be Filled TO CORRECT. PEND.*

**CERTIFICATION OF COMPLIANCE WITH THE NOTIFIED 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 # 34426  
Name: AJ's Services  
Address 1: PO BOX 1118  
Address 2: \_\_\_\_\_  
City: El Dorado State: KS Zip: 67042 + \_\_\_\_\_  
Contact Person: John Brickley  
Phone: (316) 322-7478 Fax: (316) 452-5215  
Email Address: jonathan@ajsservices.net

Well Location: \_\_\_\_\_  
Sec. 32 Twp. 26S S. R. 5  East  West  
County: BUTLER  
Lease Name: MOLK BROWN Well #: 1A

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

**Surface Owner Information:**

Name: \_\_\_\_\_  
Address 1: \_\_\_\_\_  
Address 2: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ + \_\_\_\_\_

*will find out ASAP*

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: 04/15/11 Signature of Operator or Agent: John Brickley Title: Partner

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APR 18 2011

KCC WICHITA

2ND KSONA-1 INCORRECT

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

KSONA-1 - 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.

CORRECTED  
SEVERAL CAUSES MADE TO  
STEP. PEND  
FOR CORRECTED  
KSONA-1 FORM.

Select the corresponding form being filed:  C-1 (Intent)  CB-1 (Cathodic Protection Borehole Intent)  T-1 (Transfer)  CP-1 (Plugging Application)

OPERATOR: License # 34426  
Name: AS's Services  
Address 1: PO Box 1118  
Address 2: \_\_\_\_\_  
City: El Dorado State: KS Zip: 67042  
Contact Person: John Brickley  
Phone: (316) 322-7478 Fax: (316) 452-5215  
Email Address: \_\_\_\_\_

Well Location:  
NW. \_\_\_\_\_ Sec. 32 Twp. 26 S. R. 5  East  West  
County: Butler  
Lease Name: Molk Brown Well #: 1-A

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

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MAY 10 2011

KCC WICHITA

Surface Owner Information:  
Name: Roger Johnson  
Address 1: 724 N. Washington  
Address 2: \_\_\_\_\_  
City: El Dorado State: KS Zip: 67042

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.

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I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date: 5-9-11 Signature of Operator or Agent: John Brickley Title: partner

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JUN 28 2011  
KCC WICHITA

CERTIFICATION OF COMPLIANCE WITH THE  
KANSAS SURFACE OWNER NOTIFICATION ACT

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Select the corresponding form being filed:  C-1 (Intent)  CB-1 (Cathodic Protection Borehole Intent)  T-1 (Transfer)  CP-1 (Plugging Application)

OPERATOR: License # 34426  
Name: AJ's Services  
Address 1: PO BOX 1118  
Address 2: \_\_\_\_\_  
City: El Dorado State: KS Zip: 67042 + \_\_\_\_\_  
Contact Person: John Brickley  
Phone: (316) 322-7478 Fax: (316) 452-5215  
Email Address: jonathan@ajsservices.net

Well Location:  
NE SW Sec 32 Twp. 26S S. R. 5  East  West  
County: BUTLER  
Lease Name: MOLK BROWN Well #: 1A

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

Surface Owner Information:  
Name: ROGER JOHNSON  
Address 1: 724 N. WASHINGTON  
Address 2: \_\_\_\_\_  
City: EL DORADO State: KS Zip: 67042 + \_\_\_\_\_

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.

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I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date: 5/16/11 Signature of Operator or Agent: \_\_\_\_\_ Title: \_\_\_\_\_

**CERTIFICATION OF COMPLIANCE WITH THE RECD  
KANSAS SURFACE OWNER NOTIFICATION ACT** *ART. WELL PLUGGED.*

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).  
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*W*  
*9/20/11*

Select the corresponding form being filed:  C-1 (Intent)  CB-1 (Cathodic Protection Borehole Intent)  T-1 (Transfer)  CP-1 (Plugging Application)

OPERATOR: License # 34426  
Name: AJ's Services  
Address 1: PO BOX 1118  
Address 2: \_\_\_\_\_  
City: El Dorado State: KS Zip: 67042 + \_\_\_\_\_  
Contact Person: John Brickley  
Phone: (316) 322-7478 Fax: (316) 452-5215  
Email Address: jonathan@ajsservices.net

Well Location:  
NE - SW Sec. 32 Twp. 26S R. 5  East  West  
County: BUTLER  
Lease Name: MOLK BROWN Well #: 1A

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JUL 01 2011  
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**Surface Owner Information:**

Name: ROGER JOHNSON  
Address 1: 724 N. WASHINGTON  
Address 2: \_\_\_\_\_  
City: EL DORADO State: KS Zip: 67042 + \_\_\_\_\_

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I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date: 6/29/11 Signature of Operator or Agent: [Signature] Title: Partner



Sam Brownback, Governor, Mark Sievers, Chairman, Ward Loyd, Commissioner, Thomas E. Wright, Commissioner

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

• AJ'S SERVICES, A GENERAL PARTNERSHIP  
924 N. TOPEKA ST.  
ELDORADO, KS 67042

June 29, 2011

Re: MOCK BROWN #1-A  
API 15-015-19143-00-00  
32-26S-5E, 2310 FSL 3630 FEL  
BUTLER COUNTY, KANSAS

Dear Operator:

The purpose of this letter is twofold. First, 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.**

This letter is also to notify you that during the central office's review of your CP-1 for license number verification, staff has discovered that you are not the current operator of record of the above well on file with the Conservation Division. **Central office staff is therefore requesting that you verify that you are the operator of record of the above well. The proper procedure for verifying operator authority is by filing a Conservation Division form T-1 (Request for Change of Operator; Transfer of Injection or Surface Pit Permit).** If a T-1 has already been filed with the Conservation Division reflecting the transfer of operator authority, please disregard this paragraph. If a T-1 has not been filed reflecting the transfer, please see the attached letter, which explains the T-1 filing process.

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. Furthermore, 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 December 26, 2011. 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: #2  
3450 N. Rock Road, Suite 601  
Wichita, KS 67226  
(316) 630-4000