# 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 #: 4058                                                              |                               | API No. 15 - 057-20708 - 0000                                    | ' V        |  |
|----------------------------------------------------------------------------------------|-------------------------------|------------------------------------------------------------------|------------|--|
| Name: American Warrior Inc. Address 1: P.O. Box 399                                    |                               | If pre 1967, supply original completion date:  Spot Description: |            |  |
|                                                                                        |                               |                                                                  |            |  |
| City: Garden City State: Ks.                                                           | Zip: 67846 + 0399             | Feet from North / 🗹 South Line                                   | of Section |  |
| Contact Person: Jody Smith                                                             | , <u> </u>                    | — 1,100 Feet from ✓ East / West Line                             | of Section |  |
| Phone: (620 ) 275-2963                                                                 |                               | Footages Calculated from Nearest Outside Section Corner:         |            |  |
| Priorie. ( ==== )                                                                      |                               |                                                                  |            |  |
|                                                                                        |                               | Lease Name: Burke Well #: 1-27                                   |            |  |
|                                                                                        |                               |                                                                  |            |  |
| Check One: ✓ Oil Well Gas Well OG                                                      |                               | nodic Water Supply Well Other:                                   |            |  |
| SWD Permit #:                                                                          | ENHR Permit #:                |                                                                  |            |  |
| Conductor Casing Size:                                                                 |                               |                                                                  |            |  |
| Surface Casing Size: 85/8                                                              |                               | Cemented with: 165                                               |            |  |
| Production Casing Size: 51/2                                                           | Set at: 4880                  | Cemented with: 125sx                                             | Sacks      |  |
| List (ALL) Perforations and Bridge Plug Sets: 4802'to 4812'                            |                               |                                                                  |            |  |
| Elevation: 2335 ( G.L. / K.B.) T.D.: 4905                                              | PBTD: _4852'                  | Anhydrite Depth: 1390'                                           |            |  |
| Condition of Well: 🗸 Good 🔲 Poor 🔲 Junk in Hole                                        | Cooling Look at:              | (Stone Correl Formation)                                         |            |  |
| <del></del>                                                                            | <del></del>                   | (Interval)                                                       |            |  |
| Proposed Method of Plugging (ettach a separate page if addition)  Per KCC Instruction. | onai space is needed).        |                                                                  |            |  |
| T et ROO mat detion.                                                                   |                               | RECEIV                                                           | ED         |  |
| Is Well Log attached to this application?                                              | Is ACO-1 filed? 🕢 Ye          | es No SEP 0 6                                                    | 2011       |  |
| If ACO-1 not filed, explain why:                                                       | 1371CO-1 Hidd: F              |                                                                  | 2011       |  |
| ii Accertion files, explain why.                                                       |                               | KCC WIC                                                          | HITA       |  |
| Dhugging of this Wall will be done in recordance with K 6                              | A 55-101 at eag and the E     | Rules and Regulations of the State Corporation Commission        |            |  |
| Company Representative authorized to supervise plugging of                             |                               | Notes and regulations of the state corporation commission        |            |  |
|                                                                                        | Cit                           | Garden City State: Ks. Zip: 67846 +                              | 0399       |  |
| Phone: ( 620 ) 275-2963                                                                |                               |                                                                  |            |  |
| Plugging Contractor License #: 32382                                                   |                               | Swift Services,Inc.                                              |            |  |
| Address 1: P.O. Box 466                                                                |                               | ddress 2:                                                        |            |  |
| City: Ness City                                                                        |                               | State: Ks Zip: 67560 +                                           | 0466       |  |
| Phone: ( 785 ) 798-2300                                                                |                               |                                                                  |            |  |
| Proposed Date of Plugging (if known): NA                                               |                               |                                                                  |            |  |
|                                                                                        | $\wedge$                      |                                                                  |            |  |
| Payment of the Plugging Fee (K.A.R. 82-3-118) will be gu                               | aranteed by Operator or Ago   | ent                                                              |            |  |
| Date: 9/2/11 Authorized Operator / Agen                                                | t: Y/by                       | (Signature)                                                      |            |  |
| Mail to: MCC Consum                                                                    | V /                           | urket - Room 2078, Wichita, Kansas 67202                         |            |  |
| mail to: NCC - Conser                                                                  | , audii Divisioii, 130 3. Ma' | irret - Nuulli 2010, viitiliid, Nalisas 0/202 /                  |            |  |

### 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 (Intent)                                                                                                                                                                                                  | Cathodic Protection Borehole Intent) T-1 (Transfer) CP-1 (Plugging Application)                                                                                                                                                                |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| OPERATOR: License # 4058                                                                                                                                                                                                                                               | Well Location:                                                                                                                                                                                                                                 |  |
| Name: American Warrior Inc.                                                                                                                                                                                                                                            | Sw SW SE SE Sec. 27 Twp. 25 S. R. 21 East  West                                                                                                                                                                                                |  |
| Address 1: P.O. Box 399                                                                                                                                                                                                                                                | County: Ford                                                                                                                                                                                                                                   |  |
| Address 2:                                                                                                                                                                                                                                                             | Lease Name: Burke Well #: 1-27                                                                                                                                                                                                                 |  |
| City: Garden City State: Ks. zip: 67846 + 0399                                                                                                                                                                                                                         | If filing a Form T-1 for multiple wells on a lease, enter the legal description of                                                                                                                                                             |  |
| Contact Person: Jody Smith                                                                                                                                                                                                                                             | the lease below:                                                                                                                                                                                                                               |  |
| Phone: (620 ) 275-2963 Fax: (785 ) 275-5067                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                |  |
| Email Address: jsmith@pmtank.com                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                |  |
| Surface Owner Information: Name:Thomas P. Burke & Lori Burke Address 1:206 S. Stafford St.                                                                                                                                                                             | 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 |  |
| Address 2:                                                                                                                                                                                                                                                             | county, and in the real estate property tax records of the county treasurer.                                                                                                                                                                   |  |
| the KCC with a plat showing the predicted locations of lease roads, tank                                                                                                                                                                                               | dic Protection Borehole Intent), you must supply the surface owners and k batteries, pipelines, and electrical lines. The locations shown on the plat in the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.               |  |
| owner(s) of the land upon which the subject well is or will be to CP-1 that I am filing in connection with this form; 2) if the form I form; and 3) my operator name, address, phone number, fax, a  I have not provided this information to the surface owner(s). I a | cknowledge that, because I have not provided this information, the vner(s). To mitigate the additional cost of the KCC performing this                                                                                                         |  |
|                                                                                                                                                                                                                                                                        | fee with this form. If the fee is not received with this form, the KSONA-1<br>1 will be returned.                                                                                                                                              |  |
| Date: 9/2/11 Signature of Operator or Agent:                                                                                                                                                                                                                           | J S Tille: Fore man                                                                                                                                                                                                                            |  |
| V                                                                                                                                                                                                                                                                      | RECEIVED                                                                                                                                                                                                                                       |  |

**KCC WICHITA** 

SEP 0 6 2011



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

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

AMERICAN WARRIOR, INC. 3118 CUMMINGS RD PO BOX 399 GARDEN CITY, KS 67846

September 06, 2011

Re: BURKE #1-27

API 15-057-20708-00-00

27-25S-21W, 175 FSL 1100 FEL FORD COUNTY, KANSAS

#### Dear Operator:

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.

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. 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 March 4, 2012. 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

Steve Bond

Production Department Supervisor

District: #1 210 E Frontview, Suite A Dodge City, KS 67801 (620) 225-8888