

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 + 1004  
Contact Person: D.S. LANGSTON  
Phone: (620) 786-0874

API No. 15 - <sup>159</sup>~~21,088~~ - 0080  
If pre 1967, supply original completion date: \_\_\_\_\_  
Spot Description: \_\_\_\_\_  
\_\_\_\_\_NE\_\_\_\_\_NW Sec. 2 Twp. 21 S. R. 6  East  West  
660 Feet from  North /  South Line of Section  
1,980 Feet from  East /  West Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
 NE  NW  SE  SW  
County: RICE  
Lease Name: WALSTEN Well #: A-1

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: 282' Cemented with: 235 SX. Sacks  
Production Casing Size: 5 1/2 Set at: 3386' Cemented with: 75 SX. Sacks

List (ALL) Perforations and Bridge Plug Sets:

OPEN HOLE COMPLETION BELOW BASE OF CASING

Elevation: 1576 ( G.L. /  K.B.) T.D.: 3388 PBDT: \_\_\_\_\_ 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):

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 POSSIBLY FILED BY TOM KAT, LTD. BACK IN 1981, BUT WE DON'T HAVE IT NOR LOGS

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

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

Date: 9/21/2011 Authorized Operator / Agent: \_\_\_\_\_  
(Signature)

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

RECEIVED  
SEP 26 2011  
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.*

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 + 1004  
Contact Person: \_\_\_\_\_  
Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ Fax: ( \_\_\_\_\_ ) \_\_\_\_\_  
Email Address: \_\_\_\_\_

Well Location:  
\_\_\_\_\_ NE NW Sec. 2 Twp. 21 S. R. 6  East  West  
County: RICE  
Lease Name: WALSTEN Well #: A-1

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

**Surface Owner Information:**

Name: BILLINGSLEY FAMILY  
Address 1: 648 PLUM AVE.  
Address 2: \_\_\_\_\_  
City: INMAN State: KS Zip: 67546 + \_\_\_\_\_

*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: 9/21/2011 Signature of Operator or Agent: \_\_\_\_\_ Title: Owner/Oper.

RECEIVED

SEP 26 2011

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

Sept. 21, 2011

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

RECEIVED  
KCC DISTRICT #2  
SEP 27 2011  
WICHITA, KS

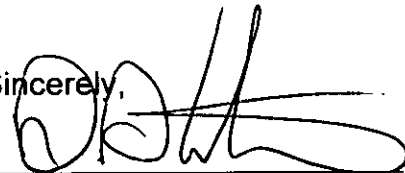
Re: **Well Plugging Application: CP-1, CDP-1 & KSONA-1**  
for the **WALSTEN #A-1** well  
located within the NE NW of Sec. 2-21S-6W  
API WELL # 15-195-21,088  
Rice Co., Kansas

Dear Staff:

Enclosed please find the Well Plugging Application CP-1 & CDP-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 should get there within several weeks for 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  
SEP 26 2011  
KCC WICHITA



Mark Sievers, Chairman  
Ward Loyd, Commissioner  
Thomas E. Wright, Commissioner

Corporation Commission

Sam Brownback, Governor

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

LANGSTON, D. S.  
310 W CENTRAL STE 202  
WICHITA, KS 67202-1004

September 28, 2011

Re: WALSTEN #A 1  
API 15-159-21088-00-00  
2-21S-6W, 660 FNL 1980 FWL  
RICE 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 26, 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  
Production Department Supervisor

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