KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

WATCH 2010

(This Form must be Typed

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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 #: 30742	WOST DE SUDMIRLEU WIL	API No. 15 - 009-24985 ~ 0000	JEC.
Name: Palomino Petroleum, Inc.		If pre 1967, supply original completion date:	1 Sec
Address 1: 4924 SE 84th St		Spot Description: N2 NW NE	- 1
Address 2:		N2_NW_NE_ Sec. 23 Twp. 20 S. R. 13 [East ▼ West
City: Newton State: KS	7in. 67114 . 8827	Feet from North / South	n Line of Section
Contact Person: Klee R. Watchous	Zip: +	2,030 Feet from Feat / West	Line of Section
		Footages Calculated from Nearest Outside Section Cor	ner:
Phone: (316) 799-1000		NE NW SE SW	
		County: BARTON Lease Name: LONNON B Well #: 1	
		Lease Name: Well #: 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:334	Cemented with: 320	Sacks
Production Casing Size:5 1/2"	Set at: 3593	Cemented with: 150	Sacks
List (ALL) Perforations and Bridge Plug Sets:			
Proposed Method of Plugging (attach a separate page if addition to the separate page if addition to		□ No	
Plugging of this Well will be done in accordance with K.S			
Company Representative authorized to supervise plugging o Address: 598 2nd Ave		Beaver State: KS Zip: 67525	9226
Phone: (620) 793-2032	City: _	State: NO Zip: 07323	_+_5220
		D.S.& W. Well Servicing	
4000 04th Ctook			
	Addre		
City: Great Bend		State: KS Zip: 67530	_+
Phone: (620) 793-5838		RECE	EIVEC
Proposed Date of Plugging (if known):		IAN 2	7 2012
Payment of the Plugging Fee (K.A.R. 82-3-118) will be gui	aranteed by Operator or Agent	J. L. L.	e laguer effe
Payment of the Plugging Fee (K.A.R. 82-3-118) will be guidness:	t nak. n.	(Signature) W KCCW	ICHITA_

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

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.

30742		
OPERATOR: License #30742 Name:Palomino Petroleum, Inc.	Well Location:	
	N2 NW NE Sec.23 Twp. 20 S. R. 13 East West	
Address 1: 4924 SE 84th St	County: BARTON Lease Name: LONNON B Well #: 1	
Address 2:	Lease Name: Well #:	
City: Newton State: KS Zip: 67114 + 8827	If filing a Form T-1 for multiple wells on a lease, enter the legal description of	
Contact Person: Klee Watchous	the lease below:	
Phone: (316) 799-1000 Fax: ()		
Email Address: <u>klee@palominopetroleum.com</u>		
Surface Owner Information: Name: Richard Friedeman Address 1: 1321 Main 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.	
City: Great Bend State: KS Zip: 67530 +		
the KCC with a plat showing the predicted locations of lease roads, tank	dic Protection Borehole Intent), you must supply the surface owners and 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.	
CP-1 that I am filing in connection with this form; 2) if the form to form; and 3) my operator name, address, phone number, fax, at I have not provided this information to the surface owner(s). I at	cated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address. cknowledge that, because I have not provided this information, the ener(s). To mitigate the additional cost of the KCC performing this	
If choosing the second option, submit payment of the \$30.00 handling form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-	fee with this form. If the fee is not received with this form, the KSONA-1 I will be returned.	
I hereby certify that the statements made herein are true and correct to Date: 1-26-/2-Signature of Operator or Agent: Kerk	the best of my knowledge and belief. Title: Agent	