

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

OK TO INPUT PLUGGER  
AS WKG OVER PER  
WELL CASE  
PERMITS  
LIC. EXPIR. 1998.  
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 #: 6819  
Name: SCOTTS WELL SERVICE, INC.  
Address 1: PO BOX 136  
Address 2: \_\_\_\_\_  
City: ROXBURY State: KS Zip: 67476 + \_\_\_\_\_  
Contact Person: JEFF SCOTT  
Phone: (785) 254-7828

API No. 15 - 041-20110-0000  
If pre 1967, supply original completion date: \_\_\_\_\_  
Spot Description: \_\_\_\_\_  
NE NE NE Sec. 19 Twp. 15 S. R. 2  East  West  
~~4830~~ 4983 Feet from  North /  South Line of Section  
~~330~~ 373 Feet from  East /  West Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
 NE  NW  SE  SW  
County: DICKENSON  
Lease Name: BARTEN Well #: 2

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: 8.63 Set at: 253' Cemented with: \_\_\_\_\_ Sacks  
Production Casing Size: 5.5 Set at: 2693' Cemented with: 375 HALLIBURTON LIGHT Sacks

List (ALL) Perforations and Bridge Plug Sets:

PERFS: 2628-40

Elevation: 1292 ( G.L. /  K.B.) T.D.: 2661 P.B.T.D.: \_\_\_\_\_ 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 RULES & REGULATIONS

RECEIVED  
FEB 23 2012  
KCC WICHITA

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: SCOTTS WELL SERVICE, INC.

Address: PO BOX 136 City: ROXBURY State: KS Zip: 67476 + \_\_\_\_\_

Phone: (785) 254-7828

Plugging Contractor License #: 6819 Name: SCOTTS WELL SERVICE

Address 1: PO BOX 136 Address 2: \_\_\_\_\_

City: ROXBURY State: KS Zip: 67476 + \_\_\_\_\_

Phone: (785) 254-7828

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: 2-22-12 Authorized Operator / Agent: Gilbert D. Unruh (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 # 6819  
Name: SCOTTS WELL SERVICE, INC.  
Address 1: PO BOX 136  
Address 2: \_\_\_\_\_  
City: ROXBURY State: KS Zip: 67476 + \_\_\_\_\_  
Contact Person: JEFF SCOTT  
Phone: (785) 254-7828 Fax: (\_\_\_\_\_) \_\_\_\_\_  
Email Address: \_\_\_\_\_

Well Location:  
NE NE NE Sec. 19 Twp. 15 S. R. 2  East  West  
County: DICKENSON  
Lease Name: BARTEN Well #: 2

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

**Surface Owner Information:**

Name: ROYAL BARTEN  
Address 1: 979 FLAG RD  
Address 2: \_\_\_\_\_  
City: HOPE State: KS Zip: 67451 + \_\_\_\_\_

*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: 2-22-12 Signature of Operator or Agent: Gilbert D. Ulm Title: Agent

RECEIVED

FEB 23 2012

KCC WICHITA

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

• SCOTT'S WELL SERVICE INC  
PO BOX 136  
ROXBURY, KS 67476-0136

February 27, 2012

Re: BARTEN #2  
API 15-041-20110-00-00  
19-15S-2E, 4983 FSL 373 FEL  
DICKINSON 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 August 25, 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