KANSAS CORPORATION COMMISSION FROM 2/22/12 Form CP-1
OIL & GAS CONSERVATION DIVISION
WELL PLUGGING ADDITION \* BRIG. FORMS SUBMITTED

### **WELL PLUGGING APPLICATION**

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

| Name: Grady Bolding Corporation    Name: Grady Bolding Corporation   | OPERATOR: License #: 7383  | most be submitted           | API No. 15 - 167-20,776-0000                              |                |
|--|--|-----------------------------|---|----------------|
| Address 2:   | Constant Palding Commonsti   | on                          |   |                |
| Address 2:   | •  |                             |   |                |
| City: Ellinwood  | •  |                             | SE_NE_NE_ sec. 36_ twp. 15 s. R. 13                       | East XX Wes    |
| Contact Person:   Grady Bolding  |  | 67526 ·                     |   | ine of Section |
| Phone: ( 620 ) 564-2240   Ce11# 620-797-0115   Footges Estimated from Nearest Clusters Section Corner:   |  | _ Zip:+                     | 330 Feet from 🔀 East / West Li                            | ne of Section  |
| County: Russel1 Lease Name: Sellens C Well #: 5  Check One: Signature Cashing Stee: State: Set at: Camented with: Sacks Surface Cashing Stee: Set at: Camented with: Sacks Surface Cashing Stee: S 1 / 2" Set at: 450 'Cemented with: 250 Sacks Production Cashing Stee: 5 1 / 2" Set at: 3342 'Cemented with: 100 Sacks List (ALL) Perforations and Bridge Plug Sets: Open hole completion  Elevation: 1885 '( Gal. / Rikel) T.D.: 3343 'PBTD: Anhydrite Depth: 824 '(Stane Correl Formation)  Condition of Well: Good Signature A separate page if additional space is needed;  will plug according to instructions by districtoofffice  Is Well Log attached to this application? Yes Signature on the Rules and Regulations of the State Corporation Commission  Company Representative authorized to supervise plugging operations: Grady Bolding  Address: P.O. Box 486 City: Ellinwood State: KS zip: 6.7526 + Phone: (620) 564-2240  Phugging contracter License #: 31529 Name: Make 's Testing & Salvage, Inc.  Address: P.O. Box 467 Address: State: KS zip: 6.7524 + State: KS zip: 6.7524 + City: Chase  Proposed Date of Plugging (if known): 02/23/12  |  | 707 0115                    | · ·   |                |
| Check One:   Sol   Well   Gas   Ga | Phone: ( 620) 364-2240 Cell# 620   | -/9/-0115                   |   |                |
| Check One: Strong of the Well Gas Well Gas Well Gas Well Gas Well Gas  | •  |                             | Oddiny:   |                |
| SWD   Permit #:  | <u> </u>   |                             | Lease Name: Sellens C Well #: 5                           |                |
| Sacks   Surface Casing Size:   Set at:   Commented with:   Sacks   Surface Casing Size:   8   5 / 8   Set at:   450   Cemented with:   250   Sacks   Sacks   Surface Casing Size:   5   1/2   Set at:   3342   Cemented with:   100   Sacks   Sacks  | Check One: XX Oil Well Gas Well OG   | D&A Cat                     | thodic Water Supply Well Other:                           |                |
| Surface Casing Size: 8 5/811 Set at: 4501 Cemented with: 250 Sacks Production Casing Size: 5 1/211 Set at: 33421 Cemented with: 100 Sacks List (ALL) Perforations and Bridge Plug Sets:  Open hole completion  Elevation: 18851 (  | SWD Permit #:  | _ ENHR Permit #:            | Gas Storage Permit #:                                     |                |
| Surface Casing Size: 8 5/81" Set at: 450 ' Cemented with: 250 Sacks  Production Casing Size: 5 1/2" Set at: 3342 ' Cemented with: 100 Sacks  List (ALL) Perforations and Bridge Plug Sets:  Open hole completion  Elevation: 1885 ' (  | Conductor Casing Size:   | Set at:                     | Cemented with:  | Sacks          |
| List (ALL) Perforations and Bridge Plug Sets:  Open hole completion  Elevation: 1885' (  |  |                             |   |                |
| Open hole completion   1885   (   GL /   Rick   T.D.:   3343   PBTD:   Anhydrite Depth:   824   (Stone Corral Formation)   | Production Casing Size: 5 1/2"   | Set at: <u>3342</u> '       | Cemented with: 100  | Sacks          |
| Elevation: 1885 ' ( G.L / 1830 B) T.D.: 3343 ' PBTD: Anhydrite Depth: 824 ' (Stone Corral Formation)  Condition of Well: Good X Poor Junk in Hole Casing Leak at: (Interval)  Proposed Method of Plugging (attach a separate page if additional space is needed):  will plug according to instructions by districtoofffice  Is Well Log attached to this application? Yes X No Is ACO-1 filed? X Yes No  If ACO-1 not filed, explain why:  Plugging of this Well will be done in accordance with K.S.A. 55-101 gt. seg. and the Rules and Regulations of the State Corporation Commission  Company Representative authorized to supervise plugging operations: Grady Bolding  Address: P.O. Box 486  City: Ellinwood State: KS zip: 67526 +  Plugging Contractor License #: 31529  Name: Mike's Testing & Salvage, Inc.  Address 1: P.O. Box 467  Address 2: State: KS zip: 67524 +  Phone: (620) 938-2943  Proposed Date of Plugging (if known): 02/23/12   | List (ALL) Perforations and Bridge Plug Sets:  |                             |   |                |
| 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):  will plug according to instructions by districtoofffice  Is Well Log attached to this application? Yes X No Is ACO-1 filed? X Yes No  If ACO-1 not filed, explain why:  Plugging of this Well will be done in accordance with K.S.A. 55-101 at. seq. and the Rules and Regulations of the State Corporation Commission  Company Representative authorized to supervise plugging operations: Grady Bolding  Address: P.O. Box 486 City: Ellinwood State: KS zip: 67526 +  Phone: (620) 564-2240  Plugging Contractor License #: 31529 Name: Mike's Testing & Salvage, Inc.  Address 1: P.O. Box 467 Address 2: State: KS zip: 67524 +  Chase State: KS zip: 67524 +  Phone: (620) 938-2943  Proposed Date of Plugging (If Known): 02/23/12   | Open hole completion   |                             |   |                |
| Condition of Well: Good Report Junk in Hole Casing Leak at: (Interval)  Proposed Method of Plugging (eltach a separate page if additional space is needed):  will plug according to instructions by districtoofffice  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 at. seq. and the Rules and Regulations of the State Corporation Commission  Company Representative authorized to supervise plugging operations: Grady Bolding  Address: P.O. Box 486  Phone: (620) 564-2240  Plugging Contractor License #: 31529  Name: Mike's Testing & Salvage, Inc.  Address 1: P.O. Box 467  City: Chase  Phone: (620) 938-2943  Proposed Date of Plugging (If known): 02/23/12  | Elevation: 1885 ( G.L./ (K.B.) T.D.: 334   | 3 ' PBTD:                   | Anhydrite Depth: 824 (Stone Correl Formation)             |                |
| Proposed Method of Plugging (attach a separate page if additional space is needed):  will plug according to instructions by districtoofffice  Is Well Log attached to this application? Yes X No is ACO-1 filed? X Yes No  If ACO-1 not filed, explain why:  Plugging of this Well will be done in accordance with K.S.A. 55-101 at, seq. and the Rules and Regulations of the State Corporation Commission  Company Representative authorized to supervise plugging operations: Grady Bolding  Address: P.O. Box 486 City: Ellinwood State: KS Zip: 67526 + Phone: (620) 564-2240  Plugging Contractor License #: 31529 Name: Mike's Testing & Salvage, Inc.  Address 1: P.O. Box 467 Address 2:  City: Chase State: KS Zip: 67524 + Phone: (620) 938-2943  Proposed Date of Plugging (if known): 02/23/12  | Condition of Well: Good Poor Junk in Hole  | Casing Leak at:             | · · · · · · · · · · · · · · · · · · ·                     |                |
| Is Well Log attached to this application?  | Proposed Method of Plugging (attach a separate page if additional separate page if add | tional space is needed) :   | (interval)  |                |
| Plugging of this Well will be done in accordance with K.S.A. 55-101 et. seg. and the Rules and Regulations of the State Corporation Commission  Company Representative authorized to supervise plugging operations: Grady Bolding  Address: P.O. Box 486   | will plug according to in  | structions by d             | istrictoóffice  |                |
| Plugging of this Well will be done in accordance with K.S.A. 55-101 at. seq. and the Rules and Regulations of the State Corporation Commission  Company Representative authorized to supervise plugging operations: Grady Bolding  Address: P.O. Box 486   | Is Well Log attached to this application? Yes X No   | ls ACO-1 filed? X           | ∕es ☐ No  |                |
| Company Representative authorized to supervise plugging operations:  | If ACO-1 not filed, explain why:   |                             |   |                |
| Company Representative authorized to supervise plugging operations:  |  |                             | •   |                |
| Company Representative authorized to supervise plugging operations:  | Diversing of this Well will be done in appeadance with V   | C A EE 101 at eas and the   | Pulse and Regulations of the State Corneration Commission |                |
| Address: P.O. Box 486  Phone: (620) 564-2240  Plugging Contractor License #: 31529  Address 1: P.O. Box 467  City: Ellinwood state: KS zip: 67526 +  Address 2: Address 2: State: KS zip: 67524 +  Phone: (620) 938-2943  Proposed Date of Plugging (if known): 02/23/12   |  |                             |   |                |
| Phone: (_620 <sub>)</sub> 564-2240  Plugging Contractor License #:31529  Address 1:P.0. Box 467  Address 2:  | Address: P.O. Box 486  | operations.                 | Ellinwood State KS Zio 67526 +                            |                |
| Plugging Contractor License #: 31529  Address 1: P.O. Box 467  City: Chase State: KS zip: 67524 + Phone: (620) 938-2943  Proposed Date of Plugging (if known): 02/23/12  | 600 564 0040   |                             | Oldic.  |                |
| Address 1: P. 0. Box 467  Address 2: State: KS zip: 67524 + Phone: (620) 938-2943  Proposed Date of Plugging (if known): 02/23/12  |  | N                           | ame Mike's Testing & Salvage. Inc.                        |                |
| City:  |  |                             |   |                |
| Phone: $(\frac{620}{C}) \frac{938-2943}{C}$ Proposed Date of Plugging (if known): $\frac{02/23/12}{C}$   |  |                             |   | ·              |
| Proposed Date of Plugging (if known): 02/23/12   |  |                             |   |                |
|  | Proposed Date of Plugging (if known): 02/23/12   |                             |   |                |
| Payment of the Plugging Fee (K.A.R. 82-3-118) will be guaranteed by Operator or Agent  Date: 2-12-17  Authorized Operator / Agent: Signature  RECEIVED   |  |                             |   |                |
| Date: 2-12-17 Authorized Operator / Agent: Third   Talkly   KECEIVED   | Payment of the Plugging Fee (K.A.R. 82-3-118) will be gu   | saranteed by Operator or Ag | Promis  |                |
|  | Date: 2-12-17 Authorized Operator / Ager   | nt:                         | / trudy bolding 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.

| OPERATOR: License # 7383   | Well Location:   |
|--|--|
| Name: Grady Bolding Corporation  | SE_NE_NESec.36Twp. 15 _s. R. 13 East ☑ Wes   |
| Address 1: P.O. Box 486  | County Russell   |
| Address 2:   | County: Russell Lease Name: Sellens C Well #: 5  |
| Sity: Ellinwood State: KS zip: 67526 + 0486  | If filling a Form T-1 for multiple wells on a lease, enter the legal description of  |
| Contact Person: Grady Bolding  | the lease below:   |
| Phone: (620 ) 564-2240 Fax: (620 ) 564-2765  |  |
| Email Address:   |  |
|  |  |
| Surface Owner Information:   |  |
| ame: Ray E. Ruby   | When filing a Form T-1 involving multiple surface owners, attach an additiona  |
| ddress 1: 19277 Lincoln Road   | 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 surface of the register of deeds for the records of the records o |
| ddress 2:  | county, and in the real estate property tax records of the county treasurer.   |
| ty: Dorrance State: KS zip: 67634 +  |  |
| this form is being submitted with a Form C-1 (Intent) or CB-1 (Catho   | odic Protection Borehole Intent), you must supply the surface owners and   |
| ne KCC with a plat showing the predicted locations of lease roads, tan-<br>re preliminary non-binding estimates. The locations may be entered o  | k hatteries, pipelines, and electrical lines, i ne locations snown on the plat   |
| ne KCC with a plat showing the predicted locations of lease roads, tan-<br>re preliminary non-binding estimates. The locations may be entered o  | k hatteries, pipelines, and electrical lines, i ne locations snown on the plat   |
| ne KCC with a plat showing the predicted locations of lease roads, tanker preliminary non-binding estimates. The locations may be entered of elect one of the following:  I certify that, pursuant to the Kansas Surface Owner Notice Accounts to the land upon which the subject well is or will be in  | Act (House Bill 2032), I have provided the following to the surface ocated: 1) a copy of the Form C-1, Form CB-1, Form CB-1, Form T-1, or Form Deling filed is a Form C-1 or Form CB-1, the plat(s) required by this   |
| ne KCC with a plat showing the predicted locations of lease roads, tank re-preliminary non-binding estimates. The locations may be entered of elect one of the following:  I certify that, pursuant to the Kansas Surface Owner Notice A 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   | Act (House Bill 2032), I have provided the following to the surface coated: 1) a copy of the Form C-1, Form CB-1, Form CB-1, Form T-1, or Form ceing filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address.  Coknowledge that, because I have not provided this information, the green's). To mitigate the additional cost of the KCC performing this   |
| ne KCC with a plat showing the predicted locations of lease roads, tank re preliminary non-binding estimates. The locations may be entered of elect one of the following:  I certify that, pursuant to the Kansas Surface Owner Notice A owner(s) of the land upon which the subject well is or will be lead to CP-1 that I am filling 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 KCC will be required to send this information to the surface ow task, I acknowledge that I am being charged a \$30.00 handling choosing the second option, submit payment of the \$30.00 handling  | Act (House Bill 2032), I have provided the following to the surface ocated: 1) a copy of the Form C-1, Form CB-1, Form CB-1, Form T-1, or Form ceing filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address.  Coknowledge that, because I have not provided this information, the mer(s). To mitigate the additional cost of the KCC performing this fee, payable to the KCC, which is enclosed with this form.  If the fee is not received with this form, the KSONA-1  |
| ne KCC with a plat showing the predicted locations of lease roads, tank re-preliminary non-binding estimates. The locations may be entered of elect one of the following:  I certify that, pursuant to the Kansas Surface Owner Notice A owner(s) of the land upon which the subject well is or will be location; and 3) my operator name, address, phone number, fax, a I have not provided this information to the surface owner(s). I a KCC will be required to send this information to the surface ow task, I acknowledge that I am being charged a \$30.00 handling the choosing the second option, submit payment of the \$30.00 handling and the associated Form C-1, Form CB-1, Form T-1, or Form CP-   | Act (House Bill 2032), I have provided the following to the surface ocated: 1) a copy of the Form C-1, Form CB-1, Form CB-1, Form T-1, or Form ceing 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 vner(s). To mitigate the additional cost of the KCC performing this fee, payable to the KCC, which is enclosed with this form.  If the fee is not received with this form, the KSONA-1 will be returned.  |
| ne KCC with a plat showing the predicted locations of lease roads, tank re preliminary non-binding estimates. The locations may be entered of elect one of the following:  I certify that, pursuant to the Kansas Surface Owner Notice A 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 KCC will be required to send this information to the surface ow task, I acknowledge that I am being charged a \$30.00 handling   | Act (House Bill 2032), I have provided the following to the surface ocated: 1) a copy of the Form C-1, Form CB-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 vner(s). To mitigate the additional cost of the KCC performing this fee, payable to the KCC, which is enclosed with this form.  If the fee is not received with this form, the KSONA-1 will be returned.  |
| ne KCC with a plat showing the predicted locations of lease roads, tank re-preliminary non-binding estimates. The locations may be entered of elect one of the following:  I certify that, pursuant to the Kansas Surface Owner Notice A owner(s) of the land upon which the subject well is or will be location; and 3) my operator name, address, phone number, fax, a I have not provided this information to the surface owner(s). I a KCC will be required to send this information to the surface ow task, I acknowledge that I am being charged a \$30.00 handling the choosing the second option, submit payment of the \$30.00 handling and the associated Form C-1, Form CB-1, Form T-1, or Form CP-   | Act (House Bill 2032), I have provided the following to the surface ocated: 1) a copy of the Form C-1, Form CB-1, Form CB-1, Form T-1, or Form celling filled 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 viner(s). To mitigate the additional cost of the KCC performing this fee, payable to the KCC, which is enclosed with this form.  If the fee is not received with this form, the KSONA-1 will be returned.  |
| ne KCC with a plat showing the predicted locations of lease roads, tank re preliminary non-binding estimates. The locations may be entered of select one of the following:  I certify that, pursuant to the Kansas Surface Owner Notice A owner(s) of the land upon which the subject well is or will be lead to CP-1 that I am filling in connection with this form; 2) If the form I form; and 3) my operator name, address, phone number, fax, a KCC will be required to send this information to the surface owner(s). I a KCC will be required to send this information to the surface own task, I acknowledge that I am being charged a \$30.00 handling the choosing the second option, submit payment of the \$30.00 handling am and the associated Form C-1, Form CB-1, Form T-1, or Form CP-tereby certify that the statements made herein are true and correct to | Act (House Bill 2032), I have provided the following to the surface ocated: 1) a copy of the Form C-1, Form CB-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 vner(s). To mitigate the additional cost of the KCC performing this fee, payable to the KCC, which is enclosed with this form.  If the fee is not received with this form, the KSONA-1 will be returned.  |

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

FEB 2 4 2012

KANSAS CORPORATION COMMISSION TO POLLOW FOR CONSERVATION DURING TO POLLOW F

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,

| 7000   | INTER WITH THIS FORM,   |
|--|---|
| OPERATOR: License #: 7383  | API No. 15 - 167-20255-00-00  |
| Name: Grady Bolding Corporation  | If pre 1967, supply original completion date:   |
| Address 1: P.O. Box 486  | Spot Description:   |
| Address 2:   | SWWNE NE Sec. 36 Twp. 15 s. R. 13 East West   |
| City: Ellinwood State: KS Zip: 67526+  | Feet from North / South Line of Section  990 Feet from XX East / West Line of Section |
| Contact Person: Grady Bolding  | Footages Calculated from Nearest Outside Section Corner:                              |
| Phone: (_620) 564-2240 Cel1# 620-797-0115  | NW SE SW  |
|  | County: Russell   |
|  | Lease Name: Sellens C Well #: 3   |
| Check One: XXOII 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  |
|  | Cemented with: 250 Sacks  |
| Production Casing Size: 5 1/2" Set at: 3414'   | Cemented with: 125 Sacks  |
| 3371-76<br>3346-54<br>Elevation: 1884' (Хастрия) т.р.: 3436' РВТР:                       | Anhydrite Depth; 817 (Stone Cornal Formation)   |
| Condition of Well: Good XXPoor Junk in Hole Casing Leak at:                              | •   |
| Proposed Method of Plugging (attach a separate page if additional space is needed):      | (Interval)  |
| Will plug according to instructions by D   | district Office   |
| will plug according to instructions by b   | RECEIVE   |
| Is Well Log attached to this application? X Yes No Is ACO-1 filed?                       | TYes X No FEB 2 2 20  |
| If ACO-1 not filed, explain why:   | . Filed in 2/1060   |
| Certified and notarized completion report  | filed in 2/1969 KCC WICH  |
| Plugging of this Well will be done in accordance with K.S.A. 55-101 <u>st. seg</u> . and |   |
| Company Representative authorized to supervise plugging operations: Grady                |   |
| Address: P.O. Box 486  | City: Ellinwood State: KS zip: 67526 +  |
| Phone: (620 ) 564~2240   |   |
| Plugging Contractor License #: 31529   | Name: Mike's Testing & Salvage, Inc.  |
|  | Address 2:  |
| cinc Chase   | State: KS Zip: 67524 +  |
| Phone: (620) 938-2943  |   |
| Proposed Date of Plugging (if known): 2/23/12  |   |
| Payment of the Plugging Fee (K.A.R. 82-3-118) will be guaranteed by Operator of Date:    | r Agent Huly Brelly   |

### 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

KCC WICHITA

# 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.

| OPERATOR: License #   | Well Location:   |
|---|--|
| Name: Grady Bolding Corporation   | SW_NE_NESec.36 _Twp. 15 _s. R. 13 _ ☐ East ☑ West  |
| Address 1; P.O. Box 486   | 'D   |
| Address 2:  | County: RUSSEII  Lease Name: Sellens C Well #: 3   |
| Contact Person; Grady Bolding   | If filling a Form T-1 for multiple wells on a lease, enter the legal description the lease below:  |
| Phone: (620_) 564-2240 Fax: (620_) 564-2765   | ,  |
|   |  |
| Email Address:  |  |
| Surface Owner information:  |  |
| Name: Ray E. Ruby   | When filing a Form T-1 involving multiple surface owners, attach an additional<br>sheet listing all of the information to the left for each surface owner. Surface   |
| Address 1: 19277 Lincoln Road   | owner information can be found in the records of the register of deeds for the<br>county, and in the real estate property tax records of the county treasurer.   |
|   | County, and in the real estate property and records a tre desiry   |
| City: Dorrance State: KS Zip: 67634 +   |  |
| the KCC with a plat showing the predicted locations of lease mads, tan  | odic Protection Borehole intent), you must supply the surface owners and<br>k batteries, pipelines, and electrical lines. The locations shown on the plat<br>on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.  |
| the KCC with a plat showing the predicted locations of lease roads, tan<br>are preliminary non-binding estimates. The locations may be entered o<br>Select one of the following:  | k batteries, pipelines, and electrical lines. The locations shown on the plat<br>on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.  |
| the KCC with a plat showing the predicted locations of lease roads, tan are preliminary non-binding estimates. The locations may be entered of Select one of the following:   | Act (House Bill 2032), I have provided the following to the surface ocated: 1) a copy of the Form C-1, Form CB-1, Form CB-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   |
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Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202



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

Sam Brownback, Governor

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

**GRADY BOLDING CORPORATION PO BOX 486** ELLINWOOD, KS 67526-0486

February 22, 2012

Re: SELLENS C #3

API 15-167-20255-00-00

36-15S-13W, 4290 FSL 990 FEL RUSSELL 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 August 20, 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: #4 2301 E. 13th Hays, KS 67601 (785) 625-0550

*Transmission* 

☐ Please call to confirm receipt

Please respond by return fax

Call only if transmission is incomplete

## Grady Bolding Corporation

P. O. Box 486 Ellinwood, KS. 67526

Date:

02/22/2012

To:

KCC - Conservation Division

Fax number:

316-337-6211

From:

Grady Bolding Corporation

Our phone:

(620) 564-2240

Our fax:

(620) 564-2765

# of pages including cover page:

My plugging request runs out today (2/22). I was advised by the Hays office to re-file this request.

The plugging rig is moving in 2/23/12.

This information applies to Sellens C-3 and C-5 in Russell County.

Grady Bolding

RECEIVED
FEB 2 2 2012

KCC WICHITA

Conservation Division Finney State Office Building 130 S. Market, Rm. 2078 Wichita, KS 67202-3802



Phone: 316-337-6200 fox: 316-337-6211 http://kcc.ks.gov/

Sam Brownback, Governor

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

### PLUGGING APPROVAL LETTER TRANSMITTAL SHEET

Date:

February 22, 2012

To:

Grady Bolding Corp. (620) 564-2765

From:

Maggie Marcotte (316) 337-6211

Number of pages (including cover sheet): 3

Comments:

Copies of the plugging approval letterS are attached for the following two wells:

WELL NAME

SEC/TWP/RNG

API NO.

\*SELLENS C 3

36-15S-13W

15-167-20255-0000

\*SELLENS C 5

36-15S-13W

15-167-20776-0000

\*FAXED copies of the CP-1 and KSONA-1 were accepted due to the short notice of the impending plugging tomorrow. However, please make certain to mail in: the ORIGINAL CP-1 that was dated 2/22/12 and then RESIGN the KSONA-1 with today's date and send that form in as well (the copy that was faxed in still reflects the original signature date of 8/24/11).

Copies of these forms and the new plugging approval letters have been faxed to our DIST.

4 office in Hays.

I've forwarded the Surface Pit Applications for both wells on to Kathy in our EPR section ECENED

FEB 24-2012

Please contact me directly at (316) 337-6108 if you have any questions.

KEC-WIGHITA

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