Kansas Corporation Commission OIL & GAS CONSERVATION DIVISION

WELL PLUGGING APPLICATION

March 2010 This Form must be Typed Form must be Signed All blanks must be Filled

Form KSONA-1, Certification of Compliance with the Kansas Surface Owner Notification Act, MUST be submitted with this form. 15-001-03200-00-00 OPERATOR: License #: _5150 ÔLD WELL N/A **COLT ENERGY, INC.** If pre 1967, supply original completion date: N/A Address 1: POBOX 388 WESWNENE Sec. 16 Twp. 24 S. R. 18 VEast West Address 2: 1112 RHODE ISLAND RD ____ Feet from V North / South Line of Section ___ State: KS __ Zip: 66749 + 0388 _____ Feet from 🗸 East / 🗍 West Line of Section Contact Person: DENNIS KERSHNER Footages Calculated from Nearest Outside Section Corner: Phone: (620) 365-3111 V NE NW SE SW County: ALLEN Lease Name: CLINE Cathodic Water Supply Well Gas Well OG D&A Other: ENHR Permit #: _____ Gas Storage Permit #: ____ Conductor Casing Size: NONE Set at: Set at: N/A 8 5/8 Cemented with: N/A Surface Casing Size: Production Casing Size: 4.875 ____ Set at: 833 Cemented with: N/A List (ALL) Perforations and Bridge Plug Sets: **OPEN HOLE 833-869'** Elevation: 956 (G.L. / K.B.) T.D.: PBTD: _____ Anhydrite Depth: Condition of Well: Good Poor ✓ Junk in Hole Casing Leak at: ____ Proposed Method of Plugging (attach a separate page if additional space is needed): RUN 2"8RD EUE TO 869'TD. PUMP 175' CEMENT FROM TD TO 695' GEL SPACER TO 500' PUMP 50' CEMENT PLUG 500' GEL SPACER TO 300' PUMP CEMENT FROM 300' TO SURFACE TOP WELL OFF. Is Well Log attached to this application? $\hfill \square$ Yes $\hfill \hfill \hfill$ No Is ACO-1 filed? Yes V No APR 1 3 2012 If ACO-1 not filed, explain why: KCC WICHITA NO ACO-1 ON FILE IS AN OLD WELL 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: REX ASHLOCK City: IOLA State: KS Zip: 66749 + 0388 Address: P O BOX 388 Phone: (620) 365-3111 Name: W & W PRODUCTION COMPANY, GENERAL PARTNERSHIP Plugging Contractor License #: 5491 Address 1: 1150 HWY 39 City: CHANUTE State: KS zip: 66720 + 5215 Phone: (620) 431-4137

Date: 4/11/12 Authorized Operator (Agent:)

Proposed Date of Plugging (if known): 4/26/12

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

Roduction Ourk

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.

Select the corresponding form being filed:	(Cathodic Protection Borehole Intent) T-1 (Transfer) CP-1 (Plugging Application)
OPERATOR: License # 5150 Name:	Well Location: NESW WE-NE Sec. 16 Twp. 24 S. R. 18 ✓ East West
Address 1: P O BOX 388	County: ALLEN Lease Name: CLINE Well #. C-18
Address 2: 1112 RHODE ISLAND RD	Lease Name: CLINE Well #: C-18
City: IOLA State: KS Zip: 66749 + 0388	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:
Contact Person: DENNIS KERSHNER	ule lease below.
Phone: (620) 365-3111 Fax: (620) 365-3170	
Email Address: dennis@aceks.com	
Surface Owner Information: Name: GEORGE HODGES MARILYN HODGES	When filing a Form T-1 involving multiple surface owners, attach an additional
Address 1: 225 N MICHIGAN AVE STE1875	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: CHICAGO State: IL Zip: 60601 + 7757	
	nk batteries, pipelines, and electrical lines. The locations shown on the plat on 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	Act (House Bill 2032), I have provided the following to the surface located: 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.
	acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this ag fee, payable to the KCC, which is enclosed with this form.
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 CF	g fee with this form. If the fee is not received with this form, the KSONA-1 P-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: 4/11/12 Signature of Operator or Agents	On Statler Title: PRODUCTION CLERK
	Dey Statle Title: PRODUCTION CLERK RECEIVED
	APR 1 3 2012

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

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Select the corresponding form being filed:	(Cathodic Protection Borehole Intent) T-1 (Transfer) CP-1 (Plugging Application)
OPERATOR: License # 5150 COLT ENERGY, INC	Well Location: WESWNE NE Sec. 16 Twp. 24 S. R. 18 ▼ East West
Address 1: P O BOX 388	✓ _{County:} ALLEN
Address 2: 1112 RHODE ISLAND RD	Lease Name: CLINE Well #: C-18
City: IOLA State: KS Zip: 66749 + 0388	If filing a Form T-1 for multiple wells on a lease, enter the legal description of
Contact Person: DENNIS KERSHNER	the lease below:
Phone: (620) 365-3111 Fax: (620) 365-3170	
Email Address: dennis@aceks.com	
Surface Owner Information:	
Name:MARVIN E BOYER MARITAL TRUST COUANE MCCAMMON&RUTH BOYER(ROBIN BOYER,AIF)TRUSTEES	When filing a Form T-1 involving multiple surface owners, attach an additional
Address 1: P O BOX 625	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: IOLA State: KS Zip: 66749 + 0388	
Select one of the following:	on 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	Act (House Bill 2032), I have provided the following to the surface clocated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form to being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address.
	acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this ng fee, payable to the KCC, which is enclosed with this form.
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I hereby certify that the statements made herein are true and correct	Λ
Date: 4/11/12 Signature of Operator or Agent:	ley Stotler Title: PRODUCTION CLERK
	RECEIVED
	APR 1 3 2012

Kansas Corporation Commission Oil & Gas Conservation Division

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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 # 5150	Well Location:
Name: COLT ENERGY, INC	WESTURE NE Sec. 16 Twp. 24 S. R. 18 East West
Address 1: P O BOX 388	County: ALLEN
Address 2: 1112 RHODE ISLAND RD	Lease Name: CLINE Well #: C-18
City: IOLA State: KS Zip: 66749 + 0388	If filing a Form T-1 for multiple wells on a lease, enter the legal description of
Contact Person: DENNIS KERSHNER	the lease below:
Phone: (620) 365-3111 Fax: (620) 365-3170	
Email Address: dennis@aceks.com	
Surface Owner Information:	
Name: COLT ENERGY, INC	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
Address 1: P O BOX 388	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: IOLA State: KS Zip: 66749 + 0388	
	k batteries, pipelines, and electrical lines. The locations shown on the plat on 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 I	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 T-1, or Form being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address.
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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 will be returned.
I hereby certify that the statements made herein are true and correct to	o the best of my knowledge and belief.
Date: 4/11/12 Signature of Operator or Agent:	ey Staller Title: PRODUCTION CLERK
	RECEIVED

KCC WICHITA

APR 1 3 2012

Kansas Corporation Commission Oil & Gas Conservation Division

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Any such form submitted without an accompanying Form KSONA-1 will be returned.

OPERATOR: License # 5150	Well Location:
Name: COLT ENERGY, INC	NESUNE NE Sec. 16 Twp. 24 S. R. 18 Fast West
Address 1: P O BOX 388	County: ALLEN
Address 2:1112 RHODE ISLAND RD	Lease Name: CLINE Well #: C-18
City: IOLA State: KS zip: 66749 + 0388	If filing a Form T-1 for multiple wells on a lease, enter the legal description of
Contact Person: DENNIS KERSHNER	the lease below:
Phone: (620) 365-3111 Fax: (620) 365-3170	γ
Email Address: dennis@aceks.com	
Surface Owner Information:	
Name: BETTY M GWINN, KENNETH L GWINN, TRUSTEE	When filing a Form T-1 involving multiple surface owners, attach an additional
Address 1: 11 KIMBERLEY CIR	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: OAK BROOK State: IL Zip: 60523 + 1761	
	k batteries, pipelines, and electrical lines. The locations shown on the plat
are preliminary non-binding estimates. The locations may be entered or	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.
 are preliminary non-binding estimates. The locations may be entered on 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 let 	n the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. 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 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

KCC WICHITA



April 11, 2012

KCC Conservation Division 130 S Market, Room 2078 Wichita, KS 67202

RE: Well Plugging Application CP-1 &Kansas Surface Owner Notification Act form KSONA-1

Cline C18 Sec16-24-18 Allen Co., KS Kirk 13A Sec9-24-18 Allen Co., KS

To Whom It Concerns

Enclosed please find the copies of the Well Plugging Application CP-1 & Kansas Surface Owner Notification Act form KSONA-1 for the Cline lease Well C-18 located 16-24-18 & Kirk 13A located 9-24-18 both in Allen County Kansas. I have sent copies of both the CP-1 Application and the Kansas Sufrace Owner Notification Act form KSONA-1 for each surface owner.

If you have any questions please contact me at 620-365-3111

Thank you,

Sincerely, COLT ENERGY, INC.

Shirley Stotler Production Clerk Encl.

RECEIVED
APR 1 3 2012
KCC WICHITA



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

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

COLT ENERGY INC PO BOX 388 IOLA, KS 66749-0388

April 20, 2012

Re: CLINE #C-18

API 15-001-03200-00-00

16-24S-18E, 865 FNL 864 FEL ALLEN 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 October 17, 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: #3 1500 W. 7th

Chanute, KS 67220 (620) 432-2300