

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

WELL PLUGGING APPLICATION

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

NEW CP-1 SUBMITTED IN
LIEU OF CC RET'D ID
OPER. W/ LTR. DTD 4/24/12.

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

OPERATOR: License #: 6006
Name: Molz Oil Co., Inc.
Address 1: PO Box 164
Address 2: _____
City: Kiowa State: KS Zip: 67070 +
Contact Person: Ron Molz
Phone: (620) 825-4030

API No. 15 - 007-20770-0002
If pre 1967, supply original completion date: _____
Spot Description: _____
SE SW NE Sec. 14 Twp. 35 S. R. 12 East ☐ West ☒
322 Feet from 30 North 1 South Line of Section
1,734 Feet from 1 East 1 West Line of Section
Footages Calculated from Nearest Outside Section Corner:
☒ NE ☐ NW ☒ SE ☐ SW
County: Barber
Lease Name: Gottsch-Peterman Well #: 1

Check One: ☐ Oil Well ☐ Gas Well ☐ OG ☐ D&A ☐ Cathodic ☐ Water Supply Well ☐ Other: _____
☒ SWD Permit #: D-21337 ☐ ENHR Permit #: _____ ☐ Gas Storage Permit #: _____
Conductor Casing Size: _____ Set at: _____ Cemented with: _____ Sacks
Surface Casing Size: 8-5/8 Set at: 305 Cemented with: 225 Sacks
Production Casing Size: 4-1/2 Set at: 569 Cemented with: 150 Sacks

List (ALL) Perforations and Bridge Plug Sets:

Elevation: 1368 (☒ G.L. / ☐ K.B.) T.D.: 1000 P.B.T.D.: 1000 Anhydrite Depth: _____
(Stone Corral Formation)
Condition of Well: ☐ Good ☐ Poor ☐ Junk in Hole ☒ Casing Leak at: 0-569
(Interval)
Proposed Method of Plugging (attach a separate page if additional space is needed):

Per KCC Requirements

Is Well Log attached to this application? ☐ Yes ☒ No Is ACO-1 filed? ☐ Yes ☒ No

If ACO-1 not filed, explain why:

Never received from previous owner.

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: Richard McIntyre
Address: 190 US 54 Hwy. City: Ellinwood State: KS Zip: 67526 +
Phone: (620) 727-3409
Plugging Contractor License #: 31925 Name: Quality Well Service
Address 1: 190 US 54 Hwy. Address 2: _____
City: Ellinwood State: KS Zip: 67526 +
Phone: (620) 727-3409
Proposed Date of Plugging (if known): Completed 03/30/2012 P+A

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

Date: 04/09/2012 Authorized Operator / Agent: [Signature] (Signature)

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

DIST. 1

NO LTR. - WELL ALR. PLUGGED

RECEIVED
APR 10 2012
KCC WICHITA

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
**CERTIFICATION OF COMPLIANCE WITH THE
KANSAS SURFACE OWNER NOTIFICATION ACT**

Form KSONA-1
July 2010
Form Must Be Typed
Form must be Signed
All blanks must be Filled

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 # 6006
Name: Molz Oil Co., Inc.
Address 1: PO Box 164
Address 2: _____
City: Kiowa State: KS Zip: 67070 + _____
Contact Person: Ron Molz
Phone: (620) 825-4030 Fax: (620) 825-4029
Email Address: kristimolz@gmail.com

Well Location:
____ SE ____ SW ____ NE ____ Sec. 14 Twp. 35 S. R. 12 ☐ East ☒ West
County: Barber
Lease Name: Gottsch-Peterman Well #: 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: Albert Harold Gottsch
Address 1: 4105 N. Monroe
Address 2: _____
City: Hutchinson State: KS Zip: 67502 + _____

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: 04/09/2012 Signature of Operator or Agent: Kristi Molz Title: Sec.

RECEIVED

APR 10 2012

DO NOT AN ORIG. CP-1
FORM NOR ANY KSONA-1
FORM RECD. RET. TO
OPER. FOR CORRECTION.

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

WELL PLUGGING APPLICATION

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

Form CP-1
March 2010

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

OPERATOR: License #: 6006
Name: Molz oil co. Inc.
Address 1: P.O. Box 164
Address 2: _____
City: Kiowa State: K.S. Zip: 67020
Contact Person: Ron Molz
Phone: (620) 825-4030

API No. 15 - 007-20770-0002
If pre 1987, supply original completion date: _____
Spot Description: _____
SE-NE Sec. 14 Twp. 35 S. R. 12 East ☒ West
322 Feet from ☒ North / ☒ South Line of Section
1734 Feet from ☒ East / ☒ West Line of Section
Footages Calculated from Nearest Outside Section Corner:
☒ NE ☐ NW ☒ SE ☐ SW
County: Bartlett
Lease Name: Gottsch-Petermann Well #: 1

Check One: ☐ Oil Well ☐ Gas Well ☐ OG ☐ D&A ☐ Cathodic ☐ Water Supply Well ☒ Other: Disposal
☒ SWD Permit #: D-21337 ☐ ENHR Permit #: _____ ☐ Gas Storage Permit #: _____

Conductor Casing Size: _____ Set at: _____ Cemented with: _____ Sacks
Surface Casing Size: 8 5/8 Set at: 305 Cemented with: _____ Sacks
Production Casing Size: 4 1/2 Set at: 600 - 569' Cemented with: _____ Sacks

List (ALL) Perforations and Bridge Plug Sets:

Elevation: _____ (☐ G.L. / ☐ K.B.) T.D.: _____ PBTD: _____ 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):

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: Richard McIntyre - QWS

Address: 190 W 5 Hwy City: Ellinwood State: KS Zip: 67526

Phone: (620) 727-3409

Plugging Contractor License #: 31925 Name: Quality Well Service

Address 1: _____ Address 2: _____

City: _____ State: _____ Zip: _____

Phone: (_____) _____

Proposed Date of Plugging (if known): ASAP P+ A 3/30/12

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

Date: 3-28-12 Authorized Operator / Agent: Ron Molz
(Signature)

RECEIVED
APR 02 2012

KCC WICHITA

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



Phone: 316-337-6200
Fax: 316-337-6211
<http://kcc.ks.gov/>

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

Sam Brownback, Governor

April 4, 2012

**Molz Oil Company, Inc.
P.O. Box 164
Kiowa, KS 67070**

RE: CP-1 form
Lease Name: GOTTSCH-PETERMANN 1 14-35S-12W BARBER CTY
API No.: 15-007-20770-0000

Dear Operator:

The enclosed **Well Plugging Application form (CP-1)**, received April 2, 2012, is incomplete because it is a *copy* rather than an original and due to non-compliance with the **Kansas Surface Owner Notification Act (KSONA)**. This form cannot be processed without the following correction(s):

An ORIGINAL CP-1 form must be submitted. We cannot accept copies. This is required even though the well has already been plugged.

In order to comply with the Kansas Surface Owner Notification Act (KSONA), effective July 1, 2010, a KSONA-1 form must be completed and mailed with a copy of the CP-1 to the Surface Owner. You must provide the ORIGINAL KSONA-1, along with the ORIGINAL CP-1, to our office.

Please make all of the above-referenced corrections and **then return both ORIGINAL forms, along with a copy of this letter, to my attention by April 18, 2012.** If you have any questions, please contact me directly at (316) 337-6108.

Sincerely,

Marjorie (Maggie) Marcotte
Production department

Encls.

RECEIVED
APR 10 2012
KCC WICHITA