KANSAS CORPORATION COMMISSION 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, MUST be submitted with this form.

OPERATOR: License #: 34502		API No. 15	185-22256 - 6	9000	
Name: Michael Bookstore		If pre 1967, s	upply original completion	on date:	
Address 1: 472 NW 10th Street		Spot Description:			
Address 2:	at	2NW 55 NW	-4 Sec. 1 Twp	24 S. R. 14 E	ast West
City: Saint John State: KS	Zio: 67576 +	726	Feet from	North / South Lir	
Contact Person: Michael Bookstore		- <u>37</u>	Feet from	East / West Lin	e of Section
Phone: (620) 546-3218		Footages Cal		outside Section Corner	eror.
, , , , , , , , , , , , , , , , , , , ,		County: S	JNE ∐NW ∐S tafford	E []SW 4	
				e _{Well #:} 1-1	
Check One: 📝 Oil Well 🔲 Gas Well 🔲 OG	D&A Catho	odic Water Sup	oply Weil Other	r	
SWD Permit #:	ENHR Permit #:		Gas Storage Pe	rmlt #:	
Conductor Casing Size:	Set at:	Cem	ented with:		Sacks
Surface Casing Size:	Set at:	Cem	ented with:		Sacks
Production Casing Size:	Set at:	Cem	ented with:		Sacks
List (ALL) Perforations and Bridge Plug Sets:					
•					
Elevation: (G.L / K.B.) T.D.:	PBTD:	Anhydrite Depth:			
Condition of Well: Good Poor Junk in Hole	Casing Leak at:		(Stone	Corral Formation)	
Proposed Method of Plugging (attach a separate page if addition	_	(Interval)			
	(a) ap 200 (0 (100000) .				
In Marilla and a state of the s		—			
Is Well Log attached to this application? Yes V No	Is ACO-1 filed? Yes	s [] No			
If ACO-1 not filed, explain why:					
Plugging of this Well will be done in accordance with K.S.	.A. 55-101 et. sea. and the Ru	iles and Regulations	s of the State Comora	tion Commission	
Company Representative authorized to supervise plugging op				ncinty	<u> </u>
Address: 190 MS HWY 5	7	Ellinwood		zip: 67526 +	
Phone: (620) 727-3410				тр. <u></u> т	
Plugging Contractor License #: KLN 31925	Nam	Richard M	elntyre- DU	SETT W	21_SV
Address 1: Spame ABR AS P	A Book	ress 2:			
City:	- Addi		State:	Zip: +	
Phone: ()			State	zip: + ,	
Proposed Date of Plugging (if known):					
Toposos Sate of Clagging In Mounty.				DEOE N	
Payment of the Plugging Fee (K.A.R. 82-3-118) will be guar	ranteed by Operator or Agen	t ,		RECEIVI	ED
Date: 3-23-12 Authorized Operator / Agent:		tre	W	MAR 2 6	2012
•		(Signature) 7 /	V	

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 #	
Name: Michael Bookstore	Well Location: 2. NW 55 NW 4
Address 1: 72 NW 10th Street	County: Stafford
Address 2:	County: Stafford Lease Name: R.D. Bookstore Well #: 1-1 If filing a Form T-1 for multiple wells on a lease, enter the legal description of
City: Saint John State: KS Zip: 67576 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of
Contact Person: Michael Bookstore	the lease below:
Phone: (620) 546-3218 Fax: ()	_
Email Address:	_
Surface Owner Information:	
Name: Twila Faye Bookstore	When filing a Form T-1 involving multiple surface owners, attach an additional
Name: Twila Faye Bookstore Address 1: 472 NW 10th Street	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: Saint John State: KS Zip: 67576 +	_
are preliminary non-binding estimates. The locations may be entered Select one of the following:	ank batteries, pipelines, and electrical lines. The locations shown on the plat I 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 CP-1 that I am filing in connection with this form; 2) if the forr form; and 3) my operator name, address, phone number, fax.	
KCC will be required to send this information to the surface	l 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.
If choosing the second option, submit payment of the \$30.00 handlir form and the associated Form C-1, Form CB-1, Form T-1, or Form CI	ng fee with this form. If the fee is not received with this form, the KSONA-1 P-1 will be returned.
hereby certify that the statements made herein are true and correct	to the best of my knowledge and belief.
· M	to the best of my knowledge and belief. **RECEIVED** Title: Operator* **RECEIVED**

Shields Law Office, P.A.

P.O. Box 427 106 East Third St. John, Kansas 67576-2099



Emerson H. Shields

Phone: 620-549-3212 Fax: 620-549-3213

March 23, 2012

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

Re: Weil Plugging

NW/4 1-24-14, Stafford County, Kansas

Please find enclosed the Form CP-1 Well Plugging Application and Form KSONA-1 Certification of Compliance with the Kansas Surface Owner Notification Act. My client has filled out these applications to the best of his knowledge. He is trying to plug the well in the next couple of weeks and has talked with Quality Well Service of Ellinwood, Kansas.

Please instruct me on what needs to be done next.

With kindest regards, I remain,

Sincerely yours,

SHIELDS LAW OFFICE, P.A.

EHS/sjf

RECEIVED MAR 2 6 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)

BOOKSTORE, MICHAEL D. 472 NW 10TH ST ST. JOHN, KS 67576 March 27, 2012

Re: R D BOOKSTORE #1-1 API 15-185-22256-00-00 1-24S-14W, 3630 FSL 3780 FEL STAFFORD 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 September 23, 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

Stue Bond

Production Department Supervisor

District: #1 210 E Frontview, Suite A Dodge City, KS 67801 (620) 225-8888