

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 # _____
Name: Joe Wores (landowner)
Address 1: 870 Hawaii Rd
Address 2: _____
City: Humboldt State: Ks Zip: 67748
Contact Person: Mike Kepley
Phone: 620, 433-7194

API No. 15 - 001-245105-0000
If pre 1967, supply original completion date: _____
Spot Description:
NW 23 NE 25 SE 17 S. R. 17 East X West
1095 Feet from X North ✓ South Line of Section
1145 Feet from ✓ East X West Line of Section
Footages Calculated from Nearest Outside Section Corner:
NE _____ NW X SE _____ SW _____
County: Allen
Lease Name: Millis Well #: ✓

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: 4" Set at: 20ft Cemented with: 10 Sacks _____
Production Casing Size: 2 7/8 Set at: 780 Cemented with: 10 Sacks _____

List (ALL) Perforations and Bridge Plug Sets: HOOK INTO

Elevation: 914.0 (X) G.L. () K.B. T.D.: 792 PBTD: _____ Anhydrite Depth: _____
(Stone Coral 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):
Cement into formation and HOOK INTO 2 7/8 squeeze and fill tubing with cement

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: Mike Kepley
Address: 19245 Ford Rd City: Chanute State: Ks Zip: 66720

Phone: 620, 433-7194
Plugging Contractor License #: 33749 Name: KEPLEY WELL SVC., LLC

Address 1: 19245 FORD RD. Address 2: _____
City: CHANUTE State: Ks Zip: 66720

Phone: 620, 931-9212
Proposed Date of Plugging (if known): WELL ALR. PLUGGED EARLY JULY PER PART D.3.

Payment of the Plugging Fee (K.A.R. 82-3-118) will be guaranteed by Operator or Agent:
THIS WELL TO BE PLUGGED EARLY PER UNIT. FROM PLUGGING CONTRACTOR. 7/31/12.

Date: _____ Authorized Operator / Agent: _____ (Signature)

RECEIVED

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202
* RECD OK FROM LEGAL (LD) TO ACCEPT WITHOUT KSONA-1 OR SIGNATURE AS LAND-OWNER PLUGGING BY ASSISTNC. FROM D.3.
JUL 13 2012
KCC WICHITA



Corporation Commission

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

Sam Brownback, Governor

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

•LANDOWNER

July 31, 2012

, KS

Re: WILLIS #6
API 15-001-24565-00-00
23-25S-17E, 1095 FSL 1145 FEL
ALLEN 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 January 27, 2013. 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: #3
1500 W. 7th
Chanute, KS 67220
(316) 432-2300