

Notice: Fill out COMPLETELY
and return to Conservation Division at
the address below within
60 days from plugging date.

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL PLUGGING RECORD
K.A.R. 82-3-117

Form CP-4
March 2009
Type or Print on this Form
Form must be Signed
All blanks must be Filled

OPERATOR: License #: 32756
Name: Double 7 Oil and Gas LLC
Address 1: 21003 Wallace Rd.
Address 2: _____
City: Parsons State: Ks Zip: 67357 + _____
Contact Person: Bruce Schulz
Phone: (620) 423-0951
Type of Well: (Check one) ☐ Oil Well ☒ Gas Well ☒ OG ☐ D&A ☐ Cathodic
☐ Water Supply Well ☐ Other: _____ ☐ SWD Permit #: _____
☐ ENHR Permit #: _____ ☐ Gas Storage Permit #: _____
Is ACO-1 filed? ☒ Yes ☐ No If not, is well log attached? ☐ Yes ☐ No
Producing Formation(s): List All (If needed attach another sheet)
w-p Coal Depth to Top: 420 Bottom: 4-25 T.D. 765
_____ Depth to Top: _____ Bottom: _____ T.D. _____
_____ Depth to Top: _____ Bottom: _____ T.D. _____

API No. 15 - 099-23452-00-00
Spot Description: SE SE-1/4 Sec. 24 Twp. 34 S. R. 19 ☒ East ☐ West
1355+340 Feet from ☐ North / ☒ South Line of Section
330+1340 Feet from ☐ East / ☒ West Line of Section
GPS KCC
Footages Calculated from Nearest Outside Section Corner:
☐ NE ☐ NW ☒ SE ☒ SW
County: Labeite
Lease Name: Owens Well #: 1
Date Well Completed: _____
The plugging proposal was approved on: _____ (Date)
by: Chanute office (KCC District Agent's Name)
Plugging Commenced: 1-31-14
Plugging Completed: 1-31-14

Show depth and thickness of all water, oil and gas formations.

Oil, Gas or Water Records		Casing Record (Surface, Conductor & Production)			
Formation	Content	Casing	Size	Setting Depth	Pulled Out
<u>w-p Coal</u>	<u>Gas</u>	<u>Prod</u>	<u>4 1/2</u>	<u>765</u>	
		<u>Surface</u>	<u>8"</u>	<u>20</u>	

Describe in detail the manner in which the well is plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. If cement or other plugs were used, state the character of same depth placed from (bottom), to (top) for each plug set.

Cement Bottom to Top using 1" 46 Sacks

Plugging Contractor License #: 32756 99998 Name: Company Tools
Address 1: Same Address 2: _____
City: _____ State: _____ Zip: _____ + _____
Phone: (____) _____
Name of Party Responsible for Plugging Fees: Bruce Schulz
State of _____ County, _____, ss.
Bruce Schulz ☐ Employee of Operator or ☒ Operator on above-described well
(Print Name)

being first duly sworn on oath, says: That I have knowledge of the facts statements, and matters herein contained, and the log of the above-described well is as filed, a.
the same are true and correct, so help me God.

Signature: Bruce Schulz

KCC WICHITA

FEB 18 2014

RECEIVED

Travis
Copy

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: ☐ C-1 (Intent) ☐ CB-1 (Cathodic Protection Borehole Intent) ☐ T-1 (Transfer) ☒ CP-1 (Plugging Application)

OPERATOR: License # 32756
Name: Double 7 Oil and Gas LLC.
Address 1: 21003 Wallace Rd.
Address 2: _____
City: Parsons State: Ks Zip: 67357
Contact Person: Bruce Schule
Phone: (620) 423-0951 Fax: (_____) _____
Email Address: _____

Well Location: AP. C
504 54 Sec. 24 Twp. 34 S. R. 19 ☒ East ☐ West
County: LB
Lease Name: DDP Brea Owens Well #: Q-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: Bill + Mona Owens
Address 1: 5049 Ness Rd
Address 2: _____
Edna State: Ks Zip: _____

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 " 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: 1-24-14 Signature of Operator or Agent: Bruce Schule Title: Part Owner

KCC WICHITA

FEB 18 2014

HERRMAN LUMBER - PARSONS
620-421-5030
www.herrmanlumber.com

PERMIT TO:
PD No: 615
Parsons KS 67357-0615

INVOICE

NO: 317017

CASH SALE

S CASH SALE

H

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P

1-31-14

ACCT:CASH INV DATE:01-31-14 16:13 SHIP VIA: PAGE: 1
INVN:317017 SHIP DATE:01-31-14 'WHSE' MSG: 0/5 SLNN:0500
REF#: FRT TERM: PD #: 1/5 SLNN:

ORDER	SHIP UNIT	ITEM	SIZE	UOM	QUANTITY	PRICE	EXT
60	60 PC	94PORT		PC	60	9.990	599.40
		94# PORTLAND TYPE 1 (LOWESTAR)					

QUOTED PRICE BY TIM

SUB TOTAL 599.40

SALES TAX 53.34

LESS PAYMENT 652.74

BALANCE .00

60 Sacks

PAID BY CHECK#: 2607

\$652.74

TERMS: CASH

KCC WICHITA

FEB 18 2014

RECEIVED