## 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 #: _0	API No. 15 - 121-26600 • OO • OO
Name: JIM SAUNDERS	If pre 1967, supply original completion date:
Address 1: 38665 W 327TH STREET	Sawpescription:
Address 2:	ME_NE_SE_NE Sec. 36 Twp. 17 S. R. 21 VEast West
City: OSAWATOMIE State; KS Zip: 66064 +	3,650 Feet from North / South Line of Section
Contact Person: JIM SAUNDERS	— 599 Feet from ✓ East / West Line of Section
Phone: (913 ) 731-7565	Footages Calculated from Nearest Outside Section Corner:
rildie. ( = )	
	Lease Name: SAUNDERS Well #: 6
Check One:   ✓ Oil Wetl Gas Well OG D&A Cati	hodic Water Supply Well Other:
SWD Permit#: ENHR Permit#:	Gas Storage Permit #:
Conductor Casing Size: See proposed method of pluggling below. Set at:	Cemented with: Sacks
Surface Casing Size: Set at:	Cemented with: Sacks
Production Casing Size: Set at:	Cemented with: Sacks
List (ALL) Perforations and Bridge Plug Sets:	
Condition of Well: Good Poor Junk in Hole Casing Leak at: Proposed Method of Plugging (attach a separate page if additional space is needed):  After file search, well completion data was not found.	KCC WICHITA
Is Well Log attached to this application?	Yes No JUL 1 4 2014
If ACO-1 not filed, explain why:	RECEIVED
Plugging of this Well will be done in accordance with K.S.A. 55-101 et, seq. and the Company Representative authorized to supervise plugging operations: LANCE TO Address: P.O. Box 339	- · · · · · · · · · · · · · · · · · · ·
.013 . 927 9400	State: 110 2/p: 00000 +
Plugging Contractor License #: 33715	Town Oil Field Service
Address 1: A	
	State: KS Zip: 66053 +
Phone: (913 ) 837-8400	State: No Zip: 00000 +
Proposed Date of Plugging (if known):	
r represed State of Friegging (in circimy).	
Payment of the Plugging Fee (K.A.R. 82-3-118) will be guaranteed by Operator or Ag	gent /
Date: 7-//-2014 Authorized Operator / Agent:	Jun Dawndan

## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form KSONA-1 January 2014 Form Must Be Typed Form must be Signed All blanks must be Filled

**RECEIVED** 

## 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 # 0  Name: JIM SAUNDERS  Address 1: 38665 W 327TH STREET  Address 2:	Well Location:  NE_NE_SE_NE_Sec. 36 Twp. 17 S. R. 21   MIAMI
Address 1: 30000 W 027 TH CTREET	County: MIAMI Lease Name: SAUNDERS Well #: 6
Address 2:	
Contact Person. JIM SAUNDERS	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:
Phone: ( 913 ) 731-7565 Fax: ( )	
Email Address:	
Surface Owner Information:	
Name: JIM SAUNDERS         Address 1: 38665 W 327TH STREET         Address 2:	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: 33333 11 OET 111 OTT EET	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.
Address 2: KS 66064	county, and in the real estate property tax records of the county treasurer.
the KCC with a plat showing the predicted locations of lease roads, tank	dic Protection Borehole Intent), you must supply the surface owners and batteries, pipelines, and electrical lines. The locations shown on the plat
are preliminary non-binding estimates. The locations may be entered on Select one of the following:	the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.
☑ 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.	
KCC will be required to send this information to the surface ow	eknowledge that, because I have not provided this information, the ner(s). To mitigate the additional cost of the KCC performing this of the surface owner by filling out the top section of this form and CC, 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 CP-1	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	the best of my knowledge and belief.
Date: 7-11-2014 Signature of Operator or Agent:	Samper Title: Owner CC WICHITA
,	111 1 4 2014