KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

WELL PLUGGING APPLICATION

Form CP-1 July 2014 This Form must be Typed Form must be Signed All blanks must be Filled

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

OPERATOR: License #:			API No. 15 - 091-22810-00-00					
Name: Galamba Real Estate			If pre 1967, supply original completion date:					
Address 1: P.O. Box 24286		Spot	Spot Description:					
Address 2:		l C	SE_SW_NW	Sec7_ Tw	p. <u>15</u> s	. R. <u>25</u>	East West	
City: Overland Park State: Ks Zip: 66283 +			2,970 Feet from North / South Line of Section 4,290 Feet from East / West Line of Section					
Contact Person: Stephen Galamba			ages Calculate					
Phone: (816) 225-6441				NW [_		
		Cour		Johnson				
		Leas	e Name: Gala	mba (Metcalf	Partners)	Well #:	3	
Check One: ✓ Oil Well Gas Well OG	D&A C	athodic U	Vater Supply W	/ell C	ther:			
SWD Permit#:	ENHR Permit #: _			Gas Storage	Permit#:			
Conductor Casing Size:								
Surface Casing Size:7"								
Production Casing Size: 4 1/2"	Set at:71	3'	Cemented	l with:	17	'9	Sacks	
List (ALL) Perforations and Bridge Plug Sets:								
Condition of Well: Good Poor Junk in Hole Proposed Method of Plugging (attach a separate page if addition Pump cement through pipe from to su	nal space is needed):	(Interval)	oressure	cement i	nto ca	sing. Re KANSAS CORPO	Ceived Ration Commission	
(1984) I	le accid steeds. [7]) vaa 🗆 Na					0 9 2015	
Is Well Log attached to this application? Yes V No	Yes No	CONSERVATION DIVISION						
If ACO-1 not filed, explain why:					WICH	ITA, KS		
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: Consolidated Oil Well Services LLC								
Address: 1322 S. Grant PO Box 884		City: C	nanute	State: K	S Zip: _	66720	-+	
Phone: (620) 431-9210								
Plugging Contractor License #: 33961 Name			.:Consolidated Oil Well Services LLC					
Address 1: 1322 S. Grant Add		Address 2:	PO Box 88	<u> 34 </u>				
City: Chanute				_ State: K	S Zip:_	66720	_+	
Phone: (<u>620</u>) <u>431-9210</u>								
Proposed Date of Plugging (if known):			_	·				
Payment of the Flugging Fee (K.A.R. 82-3-118) will be guid	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	Agent	ters	ature)				

Mail to: KCC - Conservation Division, 266 N Main St, Ste 220, Wichita, KS 67202-1513



KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form KSONA-1 July 2014 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 (Ca	athodic Protection Borehole Intent) T-1 (Transfer) CP-1 (Plugging Application)		
OPERATOR: License #	Well Location: CSE_SW_NW_Sec7 Twp15 s. R25 Johnson Johnson		
Address 2:	County: Galamba Well #: 3		
City: Overland Park State: Ks Zip: 66283 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:		
Contact Person: Stephen Galamba Phone: (816) 225-6441	the lease below:		
Phone: (816) 225-6441 Fax: () Email Address: NA			
Surface Owner Information: Name: Galamba Real Estate Address 1: P.O. Box 24286 Address 2: City: Overland Park State: Ks Zip: 66283+	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 the KCC with a plat showing the predicted locations of lease roads, tank be are preliminary non-binding estimates. The locations may be entered on the solution of the following:	patteries, pipelines, and electrical lines. The locations shown on the plat		
I certify that, pursuant to the Kansas Surface Owner Notice Act owner(s) of the land upon which the subject well is or will be loc CP-1 that I am filing in connection with this form; 2) if the form be form; and 3) my operator name, address, phone number, fax, and	ated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form sing filed is a Form C-1 or Form CB-1, the plat(s) required by this		
☐ I have not provided this information to the surface owner(s). I ack KCC will be required to send this information to the surface own- task, I acknowledge that I must provide the name and address o that I am being charged a \$30.00 handling fee, payable to the KC	er(s). To mitigate the additional cost of the KCC performing this f the surface owner by filling out the top section of this form and		
If choosing the second option, submit payment of the \$30.00 handling fe form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1			
I hereby certify that the statements made herein are true and correct to the Date: Signature of Operator or Agent:	ne best of my knowledge and belief. Title: Left Left Left Left Left Left Left Left		