## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Fatta CP-1 July 2014 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,

NUST be submitted with this form.

OPERATOR: License #: 33711		API No. 1	<sub>5</sub> . <u>035-19152 - 00 - 0</u>	0	
Name: B-C Steel, LLC		If pre 1967, supply original completion date:			
Address 1: 1432 Nighthawk Road			cription: NE		
Address 2:	· · · · ·	<u>Se</u> .	SESE Sec. 3 Twp. 32 S. R. 7	· •	
City: Yates Center State: ks	zin: 66783 →	2,310			
Contact Person: Bert Carlson	•	380 Z		West Line of Section	
000 4040004		Footages	Catculated from Nearest Outside Section		
Phone: (620 ) 4816064		_	Owley SE SW		
			me: Ankrom Well #	<u>. 1</u>	
		Lease	ANTE: ANTE:		
Check One: Ol Well Gas Well OG	□ D&A □ Cet	thodic Water	Supply Well Other:		
SWD Permit#:	ENHR Permit#:		Gas Storage Permit #:		
Conductor Casing Size:	Set at:		Cemented with:	Sadks	
Surface Casing Size: 8 5/8	Set at: 300		Cemented with:75	Sadks	
Production Casing Size: 5 1/2	Set at: 2967		Cemented with: 200	Sadks	
List (ALL) Perforations and Bridge Plug Sets:					
Proposed Method of Plugging (ettach a separate page of addition KCC Recommendations	nal space i <u>s needed)</u> :	(Interval)	KANSAS C	RECEIVED CORPORATION COLUMNSSICE  OV 1 2 2015	
Is Well Log attached to this application?	is ACO-1 filed?	Yes 🔲 No	LEG	AL SECTION	
If ACO-1 not filed, explain why:					
		Dules and Samulan			
Plugging of this Well will be done in accordance with K.S Company Representative authorized to supervise plugging of			itions of the other Corporation Commi	251GN	
Address: 1432 Nighthawk Road	Agracions,	- Yates Ce	enter State: ks zip; 667	83 .	
Phone: (620 ) 481-6064		ыну. <u> </u>	State, Elp.	·	
Plugging Contractor License #: 34798		Name: Viking	Production, LLC		
Address 1: 1432 Nighthawk Road		Address 2:			
City: Yates Center		Ψυ( <del>Φ38</del> ξ	State: ks Zip: 6678	3 .	
Phone: (620 ) 481-6064		<del></del>	Sigig Zip	·	
Proposed Date of Plugging (if known): December	31, 2015			<u> </u>	
		-	4		
Paymont of the Plugging Fee (K.A.R. 82-3-118) will be gu:	* 1 //	gyijt V	Mauro		
Date: 11/12/15 Authorized Operator / Agen	: A SKITE I BU		/Simerrori		



## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

## CERTIFICATION OF COMPLIANCE WITH THE KANSAS SURFACE OWNER NOTIFICATION ACT

Form KGONA-1 July 2014 Form Must Be Typod Form must be Signed All blanks must be Filled

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 KSQNA-1 will be returned.

Select the corresponding form being filed: C-1 (Intent)	CB-1 (Cathodic Protection Borehole Intent) T-1 (Transfer) K CP-1 (Plugging Application)	
OPERATOR: License # 33711	Well Location;	
B-C Steel LLC	SE_SE_SE_Sec. 3 Twp. 32 S. R. 7 X East West	
Name: B-C Steel, LLC Address 1: 1432 Nighthawk Road	County: Cowley	
	Lease Name: Ankrom Well #: 1	
Address 2:  City: Yates Center State: ks Zip: 66783 +	If films a Form T.1 for multiple wells on a lease, enter the legal description of	
City: 1910 Cortison State: 14 2p: 27: 4		
Contact Person: Bert Carlson  Phone: ( 620 ) 491-6064 Fax: ( )  Email Address: b.carlson.viking@gmail.com	CANSAS CORPORATION COMMISSION	
Phone: ( ) 45 1-5557 Fax: ( )	AIOV 4 o 2045	
Email Address: D. Carloon, Vital 19 (29) Individual	NOV 1 2 2015	
	LEGAL SECTION	
Surface Owner Information:		
Name: Forest & Margaret Beamer	When filing a Form T-1 involving multiple surface owners, attach an additional	
Name: Forest & Margaret Beamer Address 1: First National Bank & Trust	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: PU BOX 545	county, and in the real estate property tax records of the county treasurer.	
City: Winfield State: Ks Zip: 87156 +		
select one of the following:    Select one of the following:   I certify that, pursuant to the Kansas Surface Owner No owner(s) of the land upon which the subject well is or will not contain the subject well in the subject well is or will not contain the subject well in the subject wel	is, tank batteries, pipelines, and electrical lines. The locations shown on the platered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.  Stice Act (House Bill 2032), I have provided the following to the surface lill 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; and 3) my operator name, address, phone number,	form being filed is a Form C-1 or Form CB-1, the plat(s) required by this fax, and email address.	
KCC will be required to send this information to the surfa	is). I acknowledge that, because I have not provided this information, the ace owner(s). To mitigate the additional cost of the KCC performing this address of the surface owner by filling out the top section of this form and to the KCC, which is enclosed with this form.	
If choosing the second option, submit payment of the \$30.00 har form and the associated Form C-1, Form CB-1, Form T-1, or Form	ndling fee with this form. If the fee is not received with this form, the KSONA-t m CP-1 will be returned.	
I hereby certify that the statements made herein are true and con	rect to the best of my knowledge and belief.	
11/12/15	1 C A Manager	
Date: Signature of Operator or Agent:	e. f Car 100 Title:	