

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form 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,
MUST be submitted with this form.

OPERATOR: License #: 35148
Name: Carroll R. Krug
Address 1: 300 Maple Street
Address 2: _____
City: Cambridge State: Ks Zip: 67023 + _____
Contact Person: Carroll Krug
Phone: (620) 218-1396

API No. 15 - 22885 15.015.22885.00.00
If pre 1967, supply original completion date: _____
Spot Description: SE1/4
SE-SWSE Sec. 3 Twp. 29 S. R. 4 East West
175 Feet from North / South Line of Section
2,013 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: BUTLER
Lease Name: WOODY-HOWARD Well #: 3

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: 8 5/8 Set at: 200 Cemented with: 70 Sacks
Production Casing Size: 4 1/2 Set at: 1955 Cemented with: 180 Sacks

List (ALL) Perforations and Bridge Plug Sets:

Elevation: _____ (G.L. / K.B.) T.D.: _____ PBTD: _____ Anhydrite Depth: _____
(Stone Corral 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):

KCC RECOMMENDED

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JAN 04 2016

CONSERVATION DIVISION
WICHITA, KS

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: Carroll Krug
Address: 300 Maple Street City: Cambridge State: ks Zip: 67023 + _____
Phone: (620) 218-1396
Plugging Contractor License #: 34798 Name: Viking Production
Address 1: 1432 Nighthawk Road Address 2: _____
City: Yates Center State: ks Zip: 66783 + _____
Phone: (620) 485-6064
Proposed Date of Plugging (if known): Jan 1st, 2015

Payment of the Plugging Fee (K.A.R. 82-3-118) will be guaranteed by Operator or Agent

Date: 12/30/2015 Authorized Operator / Agent: Rosalva Carlson Agent
(Signature)

SR

**KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
CERTIFICATION OF COMPLIANCE WITH THE
KANSAS SURFACE OWNER NOTIFICATION ACT**

Form KSONA-1
July 2014
Form Must Be Typed
Form must be Signed
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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 # 35148
Name: Carrol R Krug
Address 1: 300 Maple Street
Address 2: _____
City: Cambridge State: Ks Zip: 67023 + _____
Contact Person: Carrol Krug
Phone: (620) 218-1396 Fax: (_____) _____
Email Address: _____

Well Location:
SE E Sec. 3 Twp. 29 S. R. 4 East West
County: Butler
Lease Name: Woody-Howard Well #: 3

If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:

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Surface Owner Information:

Name: John M. Woody
Address 1: PO Box 618
Address 2: _____
City: Douglass State: Ks Zip: 67039 + _____

JAN 04 2016
CONSERVATION DIVISION
WICHITA, KS

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 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 must provide the name and address of the surface owner by filling out the top section of this form and 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: 12/30/2015 Signature of Operator or Agent: Rosalie Carlson Title: Agent