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 #: 34824			API No. 15 - 05	9-25924	-00-00			
Name: Terry George			If pre 1967, supply original completion date:					
Address 1: 30110 Maple Lane			Spot Description: _					
Address 2:	ip: _66083 _4	· \	3,649 2,814 Footages Calculate NE County: Lease Name:	Feet from Feet from d from Neare NW Frankli	North / East / est Outside S SE	South West Section Corn	Line of Section	
Check One: ✓ Oil Well Gas Well OG SWD Permit #:	D&A		Water Supply W	_				
Conductor Casing Size:			_					
Surface Casing Size:7	Set at:	24	Cemented	f with:	4		Sacks	
Production Casing Size: 2.8750	Set at:	810	Cemented	f with:	124		Sacks	
Elevation: 1043 (G.L./ K.B.) T.D.: 815	PBTD;	Anhy	drite Depth:		Stone Correl Fo	ormation)		
Condition of Well: Good Poor Junk in Hole	Casing Leak	at:		•	(Stone Corral Fo	ormation)		
Proposed Method of Plugging (attach a separate page if addition		(inter	val)					
Pump cement through pipe from botton			well.					
Is Well Log attached to this application? Yes No If ACO-1 not filed, explain why:		d? 🕢 Yes 🗀						
Plugging of this Well will be done in accordance with K.S.A. Company Representative authorized to supervise plugging ope		· -	and Regulations of t OWN Oilfield Se		rporation Co	mmission		
DO D 000	erations:		Louisburg		(S _{Zip:}	66053		
Phone: (913) 710-5400		City		State,	zip	00000		
22715		———— Name:	Town Oilfie	ld Serivio	е			
DO D 000		Address	2:					
				State: }	(S Zip:_	66053		
Phone: (913) 710-5400							- 	
Proposed Date of Plugging (if known):							<u>. </u>	
Payment of the Plugging Fee (K.A.R. 82-3-118) will be guar Date:	74	atór on Agend	lu.	otum)				

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

Kansas Corporation Commission Oil & Gas Conservation Division

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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) C	B-1 (Cathodic Protection Borehole Intent) T-1 (Transfer) X CP-1 (Plugging Application)
OPERATOR: License #	
Address 2: City: Spring Hill State: KS Zip: 66083 + Contact Person: Terry George Phone: (913) 302-1792 Fax: () Received Email Address: NA	Lease Name:
Surface Owner Information: Name: Terry George Address 1: 30110 Maple Lane 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 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.
the KCC with a plat showing the predicted locations of lease roads,	athodic Protection Borehole Intent), you must supply the surface owners and tank batteries, pipelines, and electrical lines. The locations shown on the plat ed on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.
owner(s) of the land upon which the subject well is or will	ce Act (House Bill 2032), I have provided the following to the surface be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form orm being filed is a Form C-1 or Form CB-1, the plat(s) required by this ax, and email address.
KCC will be required to send this information to the surfac). I acknowledge that, because I have not provided this information, the see owner(s). To mitigate the additional cost of the KCC performing this dress of the surface owner by filling out the top section of this form and the KCC, which is enclosed with this form.
If choosing the second option, submit payment of the \$30.00 hand form and the associated Form C-1, Form CB-1, Form T-1, or Form	dling fee with this form. If the fee is not received with this form, the KSONA-1 CP-1 will be returned.
I hereby certify that the statements made herein are true and correct Date: 1/21/16 Signature of Operator or Agent: 1/21/16	oct to the best of my knowledge and belief. Title:

Jay Scott Emler, Chair
Shari Feist Albrecht, Commissioner

Pat Apple, Commissioner

Sam Brownback, Governor

NOTICE OF RECEIPT OF WELL PLUGGING APPLICATION (CP-1)

GEORGE, TERRY 30110 MAPLE LN SPRING HILL, KS 66083

August 03, 2016

Re: NEWHOUSE #1

API 15-059-25924-00-00

33-15S-21E, 3649 FSL 2814 FEL FRANKLIN COUNTY, KANSAS

Dear Operator:

This letter is to notify you that the Conservation Division has received your plugging proposal, form CP-1, for the above well and has reviewed the proposal for completeness. The central office will now forward your CP-1 to the district office listed below for review of the proposed plugging method. Please contact the district office for approval of your proposed plugging method at least five (5) days before plugging the well, pursuant to K.A.R. 82-3-113(b). If a workover pit will be used during the plugging of the well it must be permitted. A CDP-1 form must be filed and approved prior to the use of the pit in accordance with K.A.R. 82-3-600.

The Conservation Division's review of form CP-1, either in the central or district office, does not include an inquiry into well ownership or the filing operator's legal right to plug the well. This notice in no way constitutes authorization to plug the above well by persons not having legal rights of ownership or interest in the well.

This notice is void after January 30, 2017. The CP-1 filing does not bring the above well into compliance with K.A.R. 82-3-111 with regard to the Commission's temporary abandonment requirements.

Sincerely,

District: #3 1500 W. 7th Chanute, KS 67220

(620) 432-2300

Rene Stucky Production Department Supervisor