## 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 #: 34104	API No. 15 - 15-025-20985 -0001
Name: Damm Resources LLC	
Address 1: 5548 Oil Center Road	Spot Description:
Address 2:	33339 Sec.22 Twp.333_S. R.23East X West
City: Great Bend State: KS Zip: 67530 +	Feet from North / South Line of Section Feet from East / West Line of Section
Contact Person: Cortenay J. Damm	Footages Calculated from Nearest Outside Section Corner:
Phone: ( 620 ) 793~8519	NE X NW SE SW
	County: Clark  Lease Name: Haydock Well #: 1-22 OWWO
Check One: X Oil Well Gas Well GG D&A	Cathodic Water Supply Well Other:
SWD Permit #: ENHR Permit #:	Gas Storage Permit #:
	Cemented with: Sacks
Surface Casing Size: 8-5/8" Set at: 360	Cemented with: 200 Sacks
Production Casing Size: 4-1/2" Set at: 5100	Cemented with: 100 Sacks
List (ALL) Perforations and Bridge Plug Sets: Perfs: 4672-75	
Proposed Method of Plugging (attach a separate page if additional space is needed):	JAN 17 2017
Plugging of this Well will be done in accordance with K.S.A. 55-101 et. seq. and to Company Representative authorized to supervise plugging operations: Mike Ko	
Address: P.O. Box 467	City: Chase State: KS Zip: 67524 + 0467
Phone: ( 620 ) 938-2943	
Plugging Contractor License #: 31529	Name Mike's Testing & Salvage, Inc.
Address 1: P.O. Box 467	Address 2:
	State:KS zip.67524 +0467
Phone: ( 620 ) 938-2943	
Proposed Date of Plugging (if known): ASAP	
Payment of the Plugging Fee (K.A.R. 82-3-118) will be guaranteed by Operator of	r Agent
Date: 1-12-17 Authorized Operator / Agent:	
	raiundure)

Sam Brownback, Governor

Jay Scott Emler, Chairman Shari Feist Albrecht, Commissioner Pat Apple, Commissioner

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

DAMM RESOURCES LLC 5548 OIL CENTER RD GREAT BEND, KS 67530 January 17, 2017

Re: HAYDOCK (OWWO) #1-22 API 15-025-20985-00-01 22-33S-23W, 660 FNL 660 FWL CLARK 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 July 16, 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: #1 210 E Frontview, Suite A Dodge City, KS 67801 (620) 225-8888

Rene Stucky Production Department Supervisor

# 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

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.

OPERATOR: License # 34104	Wall Leastion
OPERATOR: License # 34104  Name: Damm Resources LLC	Well Location:
Address 1: 5548 011 Center Road	County: Clark County: Clark
Address 2:	Lease Name: Haydock Well #:1-22 OWWO
City: Great Bend State: KS Zip: 67520 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:
Contact Person: Cortenay J. Damm	
Phone: ( 620 ) 793-8519 Fax: ( )	
Email Address:	
Surface Owner Information:  Name: Haydock Land Company LLC  Address 1: P.O. Box 56	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
Address 2:	county, and in the real estate property tax records of the county treasurer.
State. 120 21p. 9.002 + 0030	
the KCC with a plat showing the predicted locations of lease roads, tan	odic Protection Borehole Intent), you must supply the surface owners and lik batteries, pipelines, and electrical lines. The locations shown on the plat
the KCC with a plat showing the predicted locations of lease roads, tan	odic Protection Borehole Intent), you must supply the surface owners and ak batteries, pipelines, and electrical lines. The locations shown on the plat on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.
the KCC with a plat showing the predicted locations of lease roads, tan are preliminary non-binding estimates. The locations may be entered of Select one of the following:  I certify that, pursuant to the Kansas Surface Owner Notice wowner(s) of the land upon which the subject well is or will be leaded.	Act (House Bill 2032), I have provided the following to the surface located: 1) a copy of the Form C-1, Form CB-1, Form CB-1, Form CB-1, Form T-1, or Form being filed is a Form C-1 or Form CB-1, the plat(s) required by this
the KCC with a plat showing the predicted locations of lease roads, tan are preliminary non-binding estimates. The locations may be entered of Select one of the following:  I certify that, pursuant to the Kansas Surface Owner Notice A owner(s) of the land upon which the subject well is or will be I CP-1 that I am filing in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax, at I have not provided this information to the surface owner(s). I at KCC will be required to send this information to the surface of	Act (House Bill 2032), I have provided the following to the surface located: 1) a copy of the Form C-1, Form CB-1, Form CB-1, Form T-1, or Form being filled is a Form C-1 or Form CB-1, the plat(s) required by this and email address.  acknowledge that, because I have not provided this information, the wner(s). To mitigate the additional cost of the KCC performing this is of the surface owner by filling out the top section of this form and
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