

Pat Apple, Chairman Shari Feist Albrecht, Commissioner Jay Scott Emler, Commissioner Sam Brownback, Governor

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

KODIAK OIL POBOX 42. 119 M. Chantaugua SEDAN. KS 67361 November 20, 2017

Re: ROBB #3

API 15-019-24149-00-00

9-34S-12E, 329 FSL 5032 FEL CHAUTAUQUA COUNTY, KANSAS

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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 May 19, 2018. 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,

Rene Stucky

Production Department Supervisor

District: #3 1500 W. 7th Chanute, KS 67220 (620) 432-2300

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 #: EXPIRED 8190	API No. 15 - 15-019-24149
Name: Gary House (Kodiak Oil)	If pre 1967, supply original completion date: 4/25/1983
Address 1: 119 North Chautaugua	Spot Description:
Address 2:	SW_Sw Sec. 9 Twp. 34 S. R. 12 Fast West
City: Sedan State: KS Zip: 6	7361 Feet from North / \(\sqrt{\sqrt{\sqrt{South Line of Section}}} \)
Contact Person: Gary House	4,950 503 Feet from East / West Line of Section
Phone: (620) 725-3129	Footages Calculated from Nearest Outside Section Corner:
Phone: (020) 723-3123	NE ☐ NW ✓ SE ☐ SW
	County: Chautauqua Lease Name: Robb Well #: 3
	Lease Name: Nobb Well #:
Check One: Oil Well Gas Well OG	D&A Cathodic Water Supply Well Other:
▼ SWD Permit #; D-22078	NHR Permit #: Gas Storage Permit #:
	Cemented with: Sacks
Surface Casing Size: 7" Set at:	, a
Production Casing Size: 4.50" Set at:	20% 208 Cemented with: 2% 210 Sacks
List (ALL) Perforations and Bridge Plug Sets:	
Arbuckle Dolomite open hole from 2000 - 2	2100'
•	
Elevation: 804 (G.L./ K.B.) T.D.: 2100 PE	aTD: Anhydrite Denth:
	(Stone Corral Formation)
Condition of Well: Good Poor Junk in Hole Ca	(Interval)
Proposed Method of Plugging (attach a separate page if additional space	te is needed): KANSAS CORPORATION COMMISSION
Plug in accordance wwith KCC rules and r	egulations NOV 2 0 2817
Is Well Log attached to this application? Yes 🗹 No Is A	ACO-1 filed? Yes V No CONSERVATION DIVISION WICHITA, KS
If ACO-1 not filed, explain why:	
Will submit at later date.	
	01 et. seq. and the Rules and Regulations of the State Corporation Commission
Company Representative authorized to supervise plugging operation	
	City: Sedan State: KS Zip: 67361 +
Phone: (620_) 725-3129	
	Name: Elmore's, Inc.
	Address 2:
-	State: KS Zip; 67361 +
Phone: (620) 725-5744	
Proposed Date of Plugging (if known): December, 2017 - J	anuary, 2018
Payment of the Plugging Fee (K.A.R. 82-3-118) will be guarantee	
Date: 11/10/2017 Authorized Operator / Agent:	Surfflux (Signature)

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	(Cathodic Protection Borehole Intent) T-1 (Transfer) CP-1 (Plugging Application)
OPERATOR: License # EXPIRED	Well Location:
OPERATOR: License # EXPIRED Name: Gary House (Kodiak Oil)	SW_Sec. 9 Twp. 34 S. R. 12 🔀 East 🗌 West
Address 1: 119 North Chautauqua	County: Chautauqua
Address 2:	County: Chautauqua Lease Name: Robb Well #: 3
Address 2:	If filing a Form T-1 for multiple wells on a lease, enter the legal description of
Contact Person: Gary House	the lease below:
Phone: (620) 725-3129 Fax: ()	KANSAS CORPORATION COMMISSION
Email Address:	NOV 2 0 2017
Surface Owner Information:	CONSERVATION DIVISION: WICHITA, KS
Name: Carol S. Robb	When filing a Form T-1 involving multiple surface owners, attach an additional
Address 1: 2418 Indian Road	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.
City: Sedan State: KS Zip: 67361 +	
	nk 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.
owner(s) of the land upon which the subject well is or will be	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 T-1, or Form being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address.
KCC will be required to send this information to the surface of	acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this as of the surface owner by filling out the top section of this form and e KCC, which is enclosed with this form.
If choosing the second option, submit payment of the \$30.00 handlin form and the associated Form C-1, Form CB-1, Form T-1, or Form CI	ng fee with this form. If the fee is not received with this form, the KSONA-1 P-1 will be returned.
I hereby certify that the statements made herein are true and correct	to the best of ray knowledge and belief.
11/10/2017	Owner/Agent
Date: Signature of Operator or Agent:	~~ Title:

IDE ONE	•	Compt
(Rules 82-3-130 and 82-3-107) This form shall be filed with the Kansas Corporation Derby Building, Wichita, Kansas 67202, within ninety completion of a well, regardless of how the well was	(90) days	after the
FOR INFORMATION REGARDING THE NUMBER OF COPIES TO BE REQUIRING COPIES OF ACO-1 FORMS SEE PAGE TWO (2), SII Letter requesting confidentiality attached.		

F Attach ONE COPY of EACH wireline log run (i.e. electrical log, sonic log, gamma ray neutron log etc.) ***Check here if NO logs were run PLEASE FILL IN ALL INFORMATION. IF NOT AVAILABLE, INDICATE. IF INFORMATION LATER BECOMES AVAILABLE, SUBMIT BY LETTER. LICENSE # 8190 EXPIRATION DATE API NO. 15-019-24149 OPERATOR Kodiak Oil Company ADDRESS P. O. Box 42 COUNTY Chautauqua Sedan, Kansas 67361 FIELD Peru-Sedan ** CONTACT PERSON Gary House," PROD. FORMATION N/A PHONE 316-725-3129 Purchaser LEASE Robb **ADDRESS** WELL NO. #3 WELL LOCATION SW, SW, SW DRILLING 330 Pt. From South Darnall Drilling Co. Line and CONTRACTOR 330 Ft. from West Highway 99 South ADDRESS Sedan, KS 67361 Chautauqua County, the SW (Qtr.)SEC 9 TWP345 RGE12E (E) WELL PLAT (Office PLUGGING Darnall Drilling Co. Use Only) CONTRACTOR ADDRESS Highway 99 South KCC Sedan, KS 67361 Chautauqua County, Kansas 21001 SWD/REP & TOTAL DEPTH PLG. SPUD DATE 4/18/83 DATE COMPLETED 6-2-1983 NGPA 804 (ROTARY) (AIR) TOOLS. DRILLED WITH (CABLE) DOCKET NO. OF DISPOSAL OR REPRESSURING WELL BEING USED TO DISPOSE OF WATER FROM THIS LEASE Amount of surface pipe set and cemented 40' DV Tool Used? TYPE OF COMPLETION THIS AFFIDAVIT APPLIES TO: (Circle ONE) - 011, Shut-in Gas, Gas, Dry, (Disposal), Injection, Temporarily Abandoned. If OWWO, indicate type of recompletion Other completion . NGPA filing ALL REQUIREMENTS OF THE STATUTES, RULES AND REGULATIONS PROMULGATED TO REGULATE THE OIL AND GAS INDUSTRY HAVE BEEN FULLY COMPLIED WITH. AFFIDAVIT Gary House, d/b/a Kodiak Oil Co. , being of lawful age, hereby certifies that: I am the Affiant, and I am familiar with the contents of the foregoing Affidavit. The statements and allegations contained therein are true and correct. 2118 Gary House, d/b/a / Name) Kodiak dil Co. . SUBSCRIBED AND SWORN TO BEFORE ME this 3rd 19 83. MARY E. GLYNN Chautauqua County, Kan My Appt. Expires 7-23 DUARY PUBLICA RECEIVED
STATE COPPORATION COMMISSION MY COMMISSION EXPIRES: July 23, 1984

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15-019-24149-0000

- PAGE TWO (Side One)

PAGE TWO (Side One)

OPERATOR Kodíak Oli Company

LEASE NAME Robb

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ACO-1 WELL HISTORY

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