

APR 01 2015

LEGAL SECTION

2015.04.01 14:00:16
Kansas Corporation Commission
/S/ Neysa Thomas

Kansas Corporation Commission
266 N. Main St., Suite 220
Wichita, Kansas 67202-1513
316-337-6200

March 27, 2015

Docket No.: 15-CONS-654-CPEN

Dear Sirs:

In the above referenced case, all temporary abandonment forms were filed timely. I have included the TA's in this correspondence. I contracted John Almond in Chanute, discussed the plugging liabilities of the Truelove wells and discussed the plugging order I received from Mike Heffern dated December 22, 2014, stating the wells had to be plugged by January 21, 2015. Mr. Almond and I discussed that possibility as not practical in the time period ending on 1-21-2015. I discussed with Mr. Almond the negotiation Mr. Truelove and I were having and that I would get back with him. The original correspondence of the Truelove leases, were as follows:

Dated 11-4-2014 notice of violations from Mr. Almond:

- (1) Truelove #13-1
- (2) Truelove #18-1
- (3) Truelove #39
- (4) Truelove #41
- (5) Truelove #7-1
- (6) Truelove #7-2
- (7) Truelove #SWD-1

I filed TA on all the above wells. The TA's were denied due to lack of mineral leases, but the TA's were filed. Your correspondence of 3-3-2015 assesses a fine for failure to file form CP-111. The forms were filed as KCC requested. There should be no fine for failure to file. They were filed.

The correspondence of 3-3-2015, from the Wichita, KS. KCC office listed the following wells as failure to file for CP111:

- (1) Truelove #41
- (2) Truelove #39
- (3) Truelove #18-1
- (4) Truelove #1
- (5) Truelove #7-2
- (6) Truelove #7-1
- (7) Truelove #13-1

I am responsible for the plugging of the wells stated in the correspondence dated 11-4-2014, Notice of Violations.

- (1) I filed the requested CP-111 forms.
- (2) I should not be assessed a penalty for failure to file.
- (3) I stayed in contact with Mr. Almond in the Chanute KCC office.
- (4) To plug under the KCC deadline was impossible due to wet and inclement weather.
- (5) The time deadline was impractical for the time of year.

I request all fines be removed and a reasonable extension of plugging be initiated with liberal consideration given, due to weather conditions.

I have been in negotiations with Mr. Truelove. We have agreed to not plug the following: Truelove SWD-1
Truelove #7-2

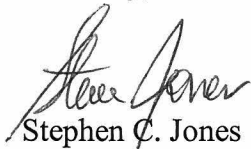
We have agreed to plug: Truelove #7-1
Truelove #13-1
Truelove #41
Truelove #39
Truelove #18-1

I have mineral leases on the wells agreed not to plug. I need the above requested extensions for the wells to be plugged.

As you are aware, the oil industry in Kansas is not particularly healthy. Money is, at best, limited. To receive a fine for doing as the KCC requested, and to be held to a schedule that is impractical is concerning. I intend to endeavor to follow every directive of the KCC as I practically can, but to receive fines and unreachable deadlines cannot be beneficial to me or any other producers and operators. As stated in the KCC Notice of Penalty Assessment dated 3-3-2015, I contest the penalty and request a hearing at earliest convenience, based upon the above statements.

I respect the authority of the KCC and shall do as directed with practical diligence.

Sincerely,



Stephen C. Jones
Operator # 33453
2332 West New Orleans
Broken Arrow, OK 74011

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

1236029

Form CP-111

June 2011

Form must be Typed

Form must be signed

All blanks must be complete

TEMPORARY ABANDONMENT WELL APPLICATION

OPERATOR: License# 33453
Name: Jones, Stephen C.
Address 1: 2332 W NEW ORLEANS
Address 2: _____
City: BROKEN ARROW State: OK Zip: 74011 + _____
Contact Person: Steve Jones
Phone: (918) 286-1499
Contact Person Email: _____
Field Contact Person: _____
Field Contact Person Phone: (_____) _____

API No. 15- 15-031-22151-00-00
Spot Description: NE SW SE SE Sec. 13 Twp. 21 S. R. 13 ☒ E ☐ W
417 feet from ☐ N / ☒ S Line of Section
887 feet from ☒ E / ☐ W Line of Section
GPS Location: Lat: _____, Long: _____
Datum: ☐ NAD27 ☐ NAD83 ☐ WGS84
County: Coffey Elevation: _____ ☐ GL ☐ KB
Lease Name: TRUELOVE SWD Well #: 1
Well Type: (check one) ☐ Oil ☐ Gas ☐ OG ☐ WSW ☐ Other: _____
☒ SWD Permit #: D28664.0 ☐ ENHR Permit #: _____
☐ Gas Storage Permit #: _____
Spud Date: 12/01/2005 Date Shut-In: 12/08/2008

	Conductor	Surface	Production	Intermediate	Liner	Tubing
Size	0	8.6250	5.5000	0	0	2.8750
Setting Depth	0	41	2242	0	0	2172
Amount of Cement	0	15	335	0	0	0
Top of Cement	0	0	0	0	0	0
Bottom of Cement	0	41	2242	0	0	0

Casing Fluid Level from Surface: 2000 How Determined? MIT Date: 05/23/2014
Casing Squeeze(s): _____ to _____ w / _____ sacks of cement, _____ to _____ w / _____ sacks of cement. Date: _____
(top) (bottom) (top) (bottom)
Do you have a valid Oil & Gas Lease? ☐ Yes ☒ No
Depth and Type: ☐ Junk in Hole at _____ ☐ Tools in Hole at _____ Casing Leaks: ☐ Yes ☐ No Depth of casing leak(s): _____
(depth) (depth)
Type Completion: ☐ ALT. I ☒ ALT. II Depth of: ☐ DV Tool: _____ w / _____ sacks of cement ☐ Port Collar: _____ w / _____ sack of cement
(depth) (depth)
Packer Type: _____ Size: _____ Inch Set at: _____ Feet
Total Depth: 2436 Plug Back Depth: _____ Plug Back Method: _____

Geological Data:

Formation Name _____ Formation Top _____ Formation Base _____ Completion Information _____
1. _____ At: _____ to _____ Feet Perforation Interval: 0 to 0 Feet or Open Hole Interval _____ to _____ Feet
2. _____ At: _____ to _____ Feet Perforation Interval: _____ to _____ Feet or Open Hole Interval _____ to _____ Feet

I HEREBY ATTEST THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE

Submitted Electronically

Do NOT Write in This Space - KCC USE ONLY	Date Tested: _____	Results: _____	Date Plugged: _____	Date Repaired: _____	Date Put Back in Service: _____
	Review Completed by: <u>Mike Heffern</u> Comments: _____				
TA Approved: ☐ Yes ☒ Denied Date: <u>12/22/2014</u>					

Mail to the Appropriate KCC Conservation Office:

	KCC District Office #3 - 1500 SW Seventh Street, Chanute, KS 66720	Phone 620.432.2300
	KCC District Office #4 - 2301 E. 13th Street, Hays, KS 67601-2651	Phone 785.625.0550

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

1236037

Form CP-111

June 2011

Form must be Typed

Form must be signed

All blanks must be complete

TEMPORARY ABANDONMENT WELL APPLICATION

OPERATOR: License# 33453
Name: Jones, Stephen C.
Address 1: 2332 W NEW ORLEANS
Address 2: _____
City: BROKEN ARROW State: OK Zip: 74011 + _____
Contact Person: Steve Jones
Phone: (918) 286-1499
Contact Person Email: _____
Field Contact Person: _____
Field Contact Person Phone: (____) _____

API No. 15- 15-031-21991-00-00
Spot Description: NW NW SE Sec. 7 Twp. 21 S. R. 14 ☒ E ☐ W
2310 feet from ☐ N / ☒ S Line of Section
2310 feet from ☒ E / ☐ W Line of Section
GPS Location: Lat: _____, Long: _____
Datum: ☐ NAD27 ☐ NAD83 ☐ WGS84
County: Coffey Elevation: _____ ☐ GL ☐ KB
Lease Name: TRUELOVE Well #: 7-1
Well Type: (check one) ☐ Oil ☒ Gas ☐ OG ☐ WSW ☐ Other: _____
☐ SWD Permit #: _____ ☐ ENHR Permit #: _____
☐ Gas Storage Permit #: _____
Spud Date: 01/02/2004 Date Shut-In: 12/08/2008

	Conductor	Surface	Production	Intermediate	Liner	Tubing
Size	0	8.6250	4.5000	0	0	2.6250
Setting Depth	0	40	1801	0	0	1740
Amount of Cement	0	17	210	0	0	0
Top of Cement	0	0	0	0	0	0
Bottom of Cement	0	40	1801	0	0	0

Casing Fluid Level from Surface: 1690 How Determined? Top perforation Date: 12/06/2008
Casing Squeeze(s): _____ to _____ w / _____ sacks of cement, _____ to _____ w / _____ sacks of cement. Date: _____
(top) (bottom) (top) (bottom)
Do you have a valid Oil & Gas Lease? ☐ Yes ☒ No
Depth and Type: ☐ Junk in Hole at _____ ☐ Tools in Hole at _____ Casing Leaks: ☐ Yes ☒ No Depth of casing leak(s): _____
(depth) (depth)
Type Completion: ☐ ALT. I ☒ ALT. II Depth of: ☐ DV Tool: _____ w / _____ sacks of cement ☐ Port Collar: _____ w / _____ sack of cement
(depth) (depth)
Packer Type: _____ Size: _____ Inch Set at: _____ Feet
Total Depth: 1804 Plug Back Depth: _____ Plug Back Method: _____

Geological Data:

Formation Name: _____ Formation Top _____ Formation Base _____ Completion Information
1. _____ At: _____ to _____ Feet Perforation Interval 1694 to 1739 Feet or Open Hole Interval _____ to _____ Feet
2. _____ At: _____ to _____ Feet Perforation Interval _____ to _____ Feet or Open Hole Interval _____ to _____ Feet

UNDER PENALTY OF PERJURY I HEREBY ATTEST THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE

Submitted Electronically

Do NOT Write in This Space - KCC USE ONLY	Date Tested: _____	Results: _____	Date Plugged: _____	Date Repaired: _____	Date Put Back in Service: _____
Review Completed by: <u>Mike Heffern</u> Comments: _____					
TA Approved: ☐ Yes ☒ Denied Date: <u>12/22/2014</u>					

Mail to the Appropriate KCC Conservation Office:

	KCC District Office #2 / UPGS - 3450 N. Rock Road, Building 600, Suite 601, Wichita, KS 67226	Phone 316.630.4060
	KCC District Office #3 - 1500 SW Seventh Street, Chanute, KS 66720	Phone 620.432.2300
	KCC District Office #4 - 2301 E. 13th Street, Hays, KS 67601-2651	Phone 785.625.0550

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

1236027

Form CP-111

June 2011

Form must be Typed

Form must be signed

All blanks must be complete

TEMPORARY ABANDONMENT WELL APPLICATION

OPERATOR: License# 33453
Name: Jones, Stephen C.
Address 1: 2332 W NEW ORLEANS
Address 2: _____
City: BROKEN ARROW State: OK Zip: 74011 + _____
Contact Person: Steve Jones
Phone: (918) 286-1499
Contact Person Email: _____
Field Contact Person: _____
Field Contact Person Phone: (_____) _____

API No. 15- 15-031-22189-00-00
Spot Description: NE NW SE SE Sec. 7 Twp. 21 S. R. 14 ☒ E ☐ W
1200 feet from ☐ N / ☒ S Line of Section
730 feet from ☒ E / ☐ W Line of Section
GPS Location: Lat: _____, Long: _____
Datum: ☐ NAD27 ☐ NAD83 ☐ WGS84
County: Coffey Elevation: _____ ☐ GL ☐ KB
Lease Name: TRUELOVE Well #: 7-2
Well Type: (check one) ☐ Oil ☒ Gas ☐ OG ☐ WSW ☐ Other: _____
☐ SWD Permit #: _____ ☐ ENHR Permit #: _____
☐ Gas Storage Permit #: _____
Spud Date: 01/20/2006 Date Shut-In: 12/06/2008

	Conductor	Surface	Production	Intermediate	Liner	Tubing
Size	0	8.6250	4.5000	0	0	2.3750
Setting Depth	0	40	1818	0	0	1720
Amount of Cement	0	30	210	0	0	0
Top of Cement	0	0	0	0	0	0
Bottom of Cement	0	40	1818	0	0	0

Casing Fluid Level from Surface: 1024 How Determined? Top perforation Date: 12/06/2008
Casing Squeeze(s): _____ to _____ w / _____ sacks of cement, _____ to _____ w / _____ sacks of cement. Date: _____
(top) (bottom) (top) (bottom)
Do you have a valid Oil & Gas Lease? ☐ Yes ☒ No
Depth and Type: ☐ Junk in Hole at _____ ☐ Tools in Hole at _____ Casing Leaks: ☐ Yes ☐ No Depth of casing leak(s): _____
(depth) (depth)
Type Completion: ☐ ALT. I ☒ ALT. II Depth of: ☐ DV Tool: _____ w / _____ sacks of cement ☐ Port Collar: _____ w / _____ sack of cement
(depth) (depth)
Packer Type: _____ Size: _____ Inch Set at: _____ Feet
Total Depth: 1800 Plug Back Depth: _____ Plug Back Method: _____

Geological Data:

Formation Name _____ Formation Top _____ Formation Base _____ Completion Information
1. _____ At: _____ to _____ Feet Perforation Interval 1024 to 1722 Feet or Open Hole Interval _____ to _____ Feet
2. _____ At: _____ to _____ Feet Perforation Interval _____ to _____ Feet or Open Hole Interval _____ to _____ Feet

I HEREBY CERTIFY THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE

Submitted Electronically

Do NOT Write In This Space - KCC USE ONLY	Date Tested:	Results:	Date Plugged:	Date Repaired:	Date Put Back in Service:
	Review Completed by: <u>Mike Heffern</u> Comments: _____				
TA Approved: ☐ Yes ☒ Denied Date: <u>12/22/2014</u>					

Mail to the Appropriate KCC Conservation Office:

	KCC District Office #2 / UPGS - 3450 N. Rock Road, Building 600, Suite 601, Wichita, KS 67226	Phone 316.630.4000
	KCC District Office #3 - 1500 SW Seventh Street, Chanute, KS 66720	Phone 620.432.2300
	KCC District Office #4 - 2301 E. 13th Street, Hays, KS 67601-2651	Phone 785.625.0550

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION



1235999

Form CP-111
June 2011

Form must be Typed
Form must be signed

All blanks must be complete

TEMPORARY ABANDONMENT WELL APPLICATION

OPERATOR: License# 33453
Name: Jones, Stephen C.
Address 1: 2332 W NEW ORLEANS
Address 2: _____
City: BROKEN ARROW State: OK Zip: 74011 + _____
Contact Person: Steve Jones
Phone: (918) 286-1499
Contact Person Email: _____
Field Contact Person: _____
Field Contact Person Phone: (_____) _____

API No. 15- 15-031-22150-00-00
Spot Description: NW NW SE Sec. 13 Twp. 21 S. R. 13 ☒ E ☐ W
2310 feet from ☐ N / ☒ S Line of Section
2310 feet from ☒ E / ☐ W Line of Section
GPS Location: Lat: _____, Long: _____
Datum: ☐ NAD27 ☐ NAD83 ☐ WGS84
County: Coffey Elevation: _____ ☐ GL ☐ KB
Lease Name: TRUELOVE Well #: 13-1
Well Type: (check one) ☐ Oil ☒ Gas ☐ OG ☐ WSW ☐ Other: _____
☐ SWD Permit #: _____ ☐ ENHR Permit #: _____
☐ Gas Storage Permit #: _____
Spud Date: 12/16/2005 Date Shut-In: 12/08/2008

	Conductor	Surface	Production	Intermediate	Liner	Tubing
Size	0	8.6250	4.5000	0	0	2.3750
Setting Depth	0	40	1839	0	0	1738
Amount of Cement	0	15	200	0	0	0
Top of Cement	0	0	0	0	0	0
Bottom of Cement	0	40	1840	0	0	0

Casing Fluid Level from Surface: 1000 How Determined? top perforation Date: 12/06/2008
Casing Squeeze(s): _____ to _____ w / _____ sacks of cement, _____ to _____ w / _____ sacks of cement. Date: _____
(top) (bottom) (top) (bottom)

Do you have a valid Oil & Gas Lease? ☐ Yes ☒ No

Depth and Type: ☐ Junk in Hole at _____ (depth) ☐ Tools in Hole at _____ (depth) Casing Leaks: ☐ Yes ☐ No Depth of casing leak(s): _____

Type Completion: ☐ ALT. I ☒ ALT. II Depth of: ☐ DV Tool: _____ w / _____ sacks of cement ☐ Port Collar: _____ w / _____ sack of cement
(depth) (depth)

Packer Type: _____ Size: _____ Inch Set at: _____ Feet

Total Depth: 1840 Plug Back Depth: _____ Plug Back Method: _____

Geological Data:

Formation Name _____ Formation Top _____ Formation Base _____ Completion Information
1. _____ At: _____ to _____ Feet Perforation Interval 1030 to 1788 Feet or Open Hole Interval _____ to _____ Feet
2. _____ At: _____ to _____ Feet Perforation Interval _____ to _____ Feet or Open Hole Interval _____ to _____ Feet

UNDER PENALTY OF PERJURY I HEREBY ATTEST THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE

Submitted Electronically

Do NOT Write in This Space - KCC USE ONLY

Date Tested: _____ Results: _____ Date Plugged: _____ Date Repaired: _____ Date Put Back in Service: _____

Review Completed by: Mike Heffern Comments: _____

TA Approved: ☐ Yes ☒ Denied Date: 12/22/2014

Mail to the Appropriate KCC Conservation Office:

	KCC District Office #1 - 210 E. Frontview, Suite A, Dodge City, KS 67801	Phone 316.226.2000
	KCC District Office #2 / UPGS - 3450 N. Rock Road, Building 600, Suite 601, Wichita, KS 67226	Phone 316.620.4000
	KCC District Office #3 - 1500 SW Seventh Street, Chanute, KS 66720	Phone 620.432.2300
	KCC District Office #4 - 2301 E. 13th Street, Hays, KS 67601-2651	Phone 785.625.0550

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

1236013

Form CP-111

June 2011

Form must be Typed

Form must be signed

All blanks must be complete

TEMPORARY ABANDONMENT WELL APPLICATION

OPERATOR: License# 33453
Name: Jones, Stephen C.
Address 1: 2332 W NEW ORLEANS
Address 2: _____
City: BROKEN ARROW State: OK Zip: 74011 + _____
Contact Person: Steve Jones
Phone: (918) 286-1499
Contact Person Email: _____
Field Contact Person: _____
Field Contact Person Phone: (_____) _____

API No. 15- 15-031-21999-00-00
Spot Description: _____
NW NW NW Sec. 18 Twp. 21 S. R. 14 ☒ E ☐ W
4950 feet from ☐ N ☒ S Line of Section
4950 feet from ☒ E ☐ W Line of Section
GPS Location: Lat: _____, Long: _____
(e.g. xxxxxxxx) (e.g. -xxxxxxx)
Datum: ☐ NAD27 ☐ NAD83 ☐ WGS84
County: Coffey Elevation: _____ ☐ GL ☐ KB
Lease Name: TRUELOVE Well #: 18-1
Well Type: (check one) ☐ Oil ☒ Gas ☐ OG ☐ WSW ☐ Other: _____
☐ SWD Permit #: _____ ☐ ENHR Permit #: _____
☐ Gas Storage Permit #: _____
Spud Date: 01/06/2004 Date Shut-In: 12/06/2008

	Conductor	Surface	Production	Intermediate	Liner	Tubing
Size	0	8.6250	4.5000	0	0	2.3750
Setting Depth	0	40	1791	0	0	1750
Amount of Cement	0	17	210	0	0	0
Top of Cement	0	0	0	0	0	0
Bottom of Cement	0	40	1800	0	0	0

Casing Fluid Level from Surface: 1466 How Determined? Top perforation Date: 12/06/2008
Casing Squeeze(s): _____ to _____ w / _____ sacks of cement, _____ to _____ w / _____ sacks of cement Date: _____
(top) (bottom) (top) (bottom)

Do you have a valid Oil & Gas Lease? ☐ Yes ☒ No

Depth and Type: ☐ Junk in Hole at _____ ☐ Tools in Hole at _____ Casing Leaks: ☐ Yes ☐ No Depth of casing leak(s): _____
(depth) (depth)

Type Completion: ☐ ALT. I ☒ ALT. II Depth of: ☐ DV Tool: _____ w / _____ sacks of cement ☐ Port Collar: _____ w / _____ sack of cement
(depth) (depth)

Packer Type: _____ Size: _____ Inch Set at: _____ Feet

Total Depth: 1800 Plug Back Depth: _____ Plug Back Method: _____

Geological Data:

Formation Name _____ Formation Top _____ Formation Base _____ Completion Information _____
1. _____ At: _____ to _____ Feet Perforation Interval 1466 to 1662 Feet or Open Hole Interval _____ to _____ Feet
2. _____ At: _____ to _____ Feet Perforation Interval _____ to _____ Feet or Open Hole Interval _____ to _____ Feet

UNDER PENALTY OF PERJURY I HEREBY ATTEST THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE

Submitted Electronically

Do NOT Write in This Space - KCC USE ONLY	Date Tested: _____	Results: _____	Date Plugged: _____	Date Repaired: _____	Date Put Back in Service: _____
Review Completed by: <u>Mike Heffern</u> Comments: _____					
TA Approved: ☐ Yes ☒ Denied Date: <u>12/22/2014</u>					

Mail to the Appropriate KCC Conservation Office:



KCC District Office #1 - 919 E. Frontview, Suite A, Dodge City, KS 67801	Phone: 620.338.8888
KCC District Office #2 / UPGS - 3450 N. Rock Road, Building 600, Suite 601, Wichita, KS 67228	Phone: 316.630.4000
KCC District Office #3 - 1500 SW Seventh Street, Chanute, KS 66720	Phone: 620.432.2300
KCC District Office #4 - 2301 E. 13th Street, Hays, KS 67601-2851	Phone: 785.625.0550

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION



1236038

Form CP-111

June 2011

Form must be Typed

Form must be signed

All blanks must be complete

TEMPORARY ABANDONMENT WELL APPLICATION

OPERATOR: License# 33453
Name: Jones, Stephen C.
Address 1: 2332 W NEW ORLEANS
Address 2: _____
City: BROKEN ARROW State: OK Zip: 74011 + _____
Contact Person: Steve Jones
Phone: (918) 286-1499
Contact Person Email: _____
Field Contact Person: _____
Field Contact Person Phone: (_____) _____

API No. 15- 15-031-22034-00-00
Spot Description: NW NW NW Sec. 25 Twp. 21 S. R. 13 ☒ E ☐ W
330 feet from ☒ N / ☐ S Line of Section
330 feet from ☐ E / ☒ W Line of Section
GPS Location: Lat: _____, Long: _____
Datum: ☐ NAD27 ☐ NAD83 ☐ WGS84
County: Coffey Elevation: _____ ☐ GL ☐ KB
Lease Name: TRUELOVE Well #: 39
Well Type: (check one) ☐ Oil ☒ Gas ☐ OG ☐ WSV ☐ Other: _____
☐ SWD Permit #: _____ ☐ ENHR Permit #: _____
☐ Gas Storage Permit #: _____
Spud Date: 12/11/2004 Date Shut-In: 12/08/2008

	Conductor	Surface	Production	Intermediate	Liner	Tubing
Size	0	8.6250	4.5000	0	0	2.3750
Setting Depth	0	40	1810	0	0	1750
Amount of Cement	0	15	210	0	0	0
Top of Cement	0	0	0	0	0	0
Bottom of Cement	0	40	1810	0	0	0

Casing Fluid Level from Surface: 1051 How Determined? Top perforation Date: 12/06/2008
Casing Squeeze(s): _____ to _____ w / _____ sacks of cement, _____ to _____ w / _____ sacks of cement. Date: _____
(top) (bottom) (top) (bottom)

Do you have a valid Oil & Gas Lease? ☐ Yes ☒ No

Depth and Type: ☐ Junk in Hole at _____ ☐ Tools in Hole at _____ Casing Leaks: ☐ Yes ☐ No Depth of casing leak(s): _____
(depth) (depth)

Type Completion: ☐ ALT. I ☒ ALT. II Depth of: ☐ DV Tool: _____ w / _____ sacks of cement ☐ Port Collar: _____ w / _____ sack of cement
(depth) (depth)

Packer Type: _____ Size: _____ Inch Set at: _____ Feet

Total Depth: 1814 Plug Back Depth: _____ Plug Back Method: _____

Geological Data:

Formation Name Formation Top Formation Base Completion Information
1. _____ At: _____ to _____ Feet Perforation Interval 1051 to 1678 Feet or Open Hole Interval _____ to _____ Feet
2. _____ At: _____ to _____ Feet Perforation Interval _____ to _____ Feet or Open Hole Interval _____ to _____ Feet

UNDER PENALTY OF PERJURY I HEREBY ATTEST THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE

Submitted Electronically

Do NOT Write in This Space - KCC USE ONLY	Date Tested: _____	Results: _____	Date Plugged: _____	Date Repaired: _____	Date Put Back in Service: _____
	Review Completed by: <u>Mike Heffern</u> Comments: _____				
TA Approved: ☐ Yes ☒ Denied Date: <u>12/22/2014</u>					

Mail to the Appropriate KCC Conservation Office:

KCC District Office #1 - 1110 E. 13th Street, Hays, KS 67601-2651	Phone 620.432.2300
KCC District Office #2 - 1000 N. Rock Road, Building 600, Suite 201, Wichita, KS 67202	Phone 620.432.2300
KCC District Office #3 - 1500 SW Seventh Street, Chanute, KS 66720	Phone 785.625.0550
KCC District Office #4 - 2301 E. 13th Street, Hays, KS 67601-2651	Phone 785.625.0550



KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

1236033

Form CP-111
June 2011

Form must be Typed
Form must be signed

All blanks must be complete

TEMPORARY ABANDONMENT WELL APPLICATION

OPERATOR: License# 33453
Name: Jones, Stephen C.
Address 1: 2332 W NEW ORLEANS
Address 2: _____
City: BROKEN ARROW State: OK Zip: 74011 + _____
Contact Person: Steve Jones
Phone: (918) 286-1499
Contact Person Email: _____
Field Contact Person: _____
Field Contact Person Phone: (_____) _____

API No. 15- 15-031-22035-00-00
Spot Description: N2 NE NE Sec. 25 Twp. 21 S. R. 13 ☒ E ☐ W
330 feet from ☒ N / ☐ S Line of Section
660 feet from ☒ E / ☐ W Line of Section
GPS Location: Lat: _____ Long: _____
Datum: ☐ NAD27 ☐ NAD83 ☐ WGS84
County: Coffey Elevation: _____ ☐ GL ☐ KB
Lease Name: TRUELOVE Well #: 41
Well Type: (check one) ☐ Oil ☒ Gas ☐ OG ☐ WSW ☐ Other: _____
☐ SWD Permit #: _____ ☐ ENHR Permit #: _____
☐ Gas Storage Permit #: _____
Spud Date: 11/17/2004 Date Shut-In: 12/08/2008

	Conductor	Surface	Production	Intermediate	Liner	Tubing
Size	0	8.6250	4.5000	0	0	2.3750
Setting Depth	0	40	1816	0	0	1775
Amount of Cement	0	15	210	0	0	0
Top of Cement	0	0	0	0	0	0
Bottom of Cement	0	40	1816	0	0	0

Casing Fluid Level from Surface: 1065 How Determined? Top perforation Date: 12/08/2008
Casing Squeeze(s): _____ to _____ w / _____ sacks of cement, _____ to _____ w / _____ sacks of cement. Date: _____
(top) (bottom) (top) (bottom)
Do you have a valid Oil & Gas Lease? ☐ Yes ☒ No
Depth and Type: ☐ Junk in Hole at _____ ☐ Tools in Hole at _____ Casing Leaks: ☐ Yes ☒ No Depth of casing leak(s): _____
(depth) (depth)
Type Completion: ☐ ALT. I ☒ ALT. II Depth of: ☐ DV Tool: _____ w / _____ sacks of cement ☐ Port Collar: _____ w / _____ sack of cement
(depth) (depth)
Packer Type: _____ Size: _____ Inch Set at: _____ Feet
Total Depth: 1832 Plug Back Depth: _____ Plug Back Method: _____

Geological Data:

Formation Name _____ Formation Top _____ Formation Base _____ Completion Information
1. _____ At: _____ to _____ Feet Perforation Interval 1065 to 1774 Feet or Open Hole Interval _____ to _____ Feet
2. _____ At: _____ to _____ Feet Perforation Interval _____ to _____ Feet or Open Hole Interval _____ to _____ Feet

UNDER PENALTY OF PERJURY I HEREBY ATTEST THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE

Submitted Electronically

Do NOT Write in This Space - KCC USE ONLY	Date Tested: _____	Results: _____	Date Plugged: _____	Date Repaired: _____	Date Put Back in Service: _____
Review Completed by: <u>Mike Heffern</u> Comments: _____					
TA Approved: ☐ Yes ☒ Denied Date: <u>12/22/2014</u>					

Mail to the Appropriate KCC Conservation Office:

	KCC District Office #2 / UPSS - 3400 N. Rock Road, Building 600, Suite 501, Wichita, KS 67226 Phone 316.630.4000
	KCC District Office #3 - 1500 SW Seventh Street, Chanute, KS 66720 Phone 620.432.2300
	KCC District Office #4 - 2301 E. 13th Street, Hays, KS 67601-2851 Phone 785.625.0550