2015-08-18 13:00:01 Kansas Corporation Commission /s/ Amy L. Gilbert

## THE STATE CORPORATION COMMISSION OF THE STATE OF KANSAS

Before Commissioners:	Shari Feist Albrecht, Chair					
J	Jay Scott Emler					
J	Pat Apple					
In the matter of the failure of Vast Pet	roleum )	Docket No.: 15-CONS-962-CPEN				
Corporation ("Operator") to comply w	/ith )					
K.A.R. 82-3-602 at the Carter #V23 well in		CONSERVATION DIVISION				
Miami County, Kansas.	)					
	)	License No.: 35013				

## **PROOF OF SERVICE**

The undersigned attorney hereby records that, pursuant to the attached Domestic Return Receipt, the operator has received valid service of the Order in this docket.

Dated this 18<sup>th</sup> day of August, 2015.

Respectfully submitted,

/s/ Jonathan R. Myers

Jonathan R. Myers, S.Ct. #25975 Litigation Counsel Kansas Corporation Commission 266 N. Main Street, Suite 220 Wichita, Kansas 67202-1513 (316) 337-6200 (Telephone) (316) 337-6106 (Facsimile)

For Commission Staff

SHAWN SMART VAST PETROLEUM CORPORATION 10939 N ALPINE HWY #510 HIGHLAND UT 84003  Article Number (Transfer from service label)  IND  ARE STRICT DELIVEY Address below:    No   No   No   No   No   SHAWN SMART   Priority Mail Express**   Registered   Return Receipt for Merchandise   Insured Mail   Collect on Delivery   4. Restricted Delivery? (Extra Fee)   Yes   Yes   Priority Mail Express**   Restricted Delivery? (Extra Fee)   Yes   Priority Mail Express**   Registered   Return Receipt for Merchandise   Priority Mail Express**   Registered   Return Receipt for Merchandise   Priority Mail Express**   Registered   Return Receipt for Merchandise   Priority Mail Express**   No   No   No   No   No   No   No   No	· · · · · · · · · · · · · · · · · · ·		IV DES		
Item 4 if Restricted Delivery is desired.  Print your name and address on the reverse so that we can return the card to you.  Attach this card to the back of the mailpiece, or on the front if space permits.  Article Addressed to:    15-966    24   10   10   10   10   10   10   10   1	SENDER: COMPLETE THIS SECT	TION	COMPLETE THIS SE	CTION ON DELIVE	ERY
10939 N ALPINE HWY #510 HIGHLAND UT 84003  3. Service Type Certified Mail*	Item 4 if Restricted Delivery is de Print your name and address on so that we can return the card to Attach this card to the back of th or on the front if space permits.  1. Article Addressed to:  30 MARAGE SHAWN SMART	sired. the reverse you. e mailpiece, 15-966	B. Received by (Print)  CSC T  D. Is delivery address	different from item 1	Date of Delivery
Article Number (Transfer from service label) 7014 2120 0004 1024 3997	10939 N ALPINE HWY #510		Certified Mali <sup>®</sup> Registered	☐ Return Receipt	for Merchandise
(Transfer from service label) 7014 2120 0004 1024 3997			4. Restricted Delivery	r? (Extra Fee)	☐ Yes
S Form 3811 July 2013 Domestic Beturn Receipt	Article Number     (Transfer from service label)	7014	2120 0004 1	024 3997	
or otth corr, only 2010 Domosio Hotain Hotoipt	PS Form 3811, July 2013	Domestic Re	turn Receipt		