

For KCC Use:	
Effective Date: _	
District #	

Spud date: _

_ Agent: _

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form C-1 October 2007 Form must be Typed Form must be Signed

Expected Spud Date:	month	day	year		Spot Description:		
	monur	uay	year			Sec Twp	
PERATOR: License#							N / S Line of Section
ame:							/ W Line of Section
ddress 1:					Is SECTION: Regular	Irregular?	
ddress 2:					(Note: Locate w	rell on the Section Plat on i	reverse side)
ty:					County:		
ontact Person:					Lease Name:		
ione:					Field Name:		
ONTRACTOR: License#_					Is this a Prorated / Spaced Fie		Yes N
ame:					Target Formation(s):		
Well Drilled For:	Well Class:	Ту	pe Equipment:		Nearest Lease or unit boundar	ry line (in footage):	
Oil Enh R	ec Infield	Г	Mud Rotary		Ground Surface Elevation:		feet MS
Gas Storag		xt.	Air Rotary		Water well within one-quarter i	mile:	Yes I
Dispos		<u> </u>	Cable		Public water supply well within	one mile:	Yes
Seismic ; # of	Holes Other				Depth to bottom of fresh water		
Other:					Depth to bottom of usable water		
If OWING: ald wall:	nformation as falls	MO:			Surface Pipe by Alternate:		
If OWWO: old well i	mormation as iolio	ows:			Length of Surface Pipe Planne		
Operator:					Length of Conductor Pipe (if a		
Well Name:					Projected Total Depth:		
Original Completion Dat	e: (Original Tot	tal Depth:		Formation at Total Depth:		
estional Davistad sullan	٠		□ Vaa [No	Water Source for Drilling Oper		
ectional, Deviated or Hor es, true vertical depth:			Yes [140	Well Farm Pond	Other:	
					DWR Permit #:		
ttom Hole Location:					(Note: A	Apply for Permit with DWR	
ttom Hole Location:					(Note: A		Yes 1
ottom Hole Location:					(Note: A		Yes 1
ttom Hole Location:					(Note: A Will Cores be taken? If Yes, proposed zone:		Yes
ttom Hole Location:				AFFI	(Note: A Will Cores be taken? If Yes, proposed zone:		Yes
ttom Hole Location: CC DKT #: e undersigned hereby a	ffirms that the dri	illing, com	pletion and eve	AFFI	(Note: A Will Cores be taken? If Yes, proposed zone:		Yes
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Well Not Drilled - Permit Expired Date: _ Signature of Operator or Agent:



IN ALL CASES PLOT THE INTENDED WELL ON THE PLAT BELOW

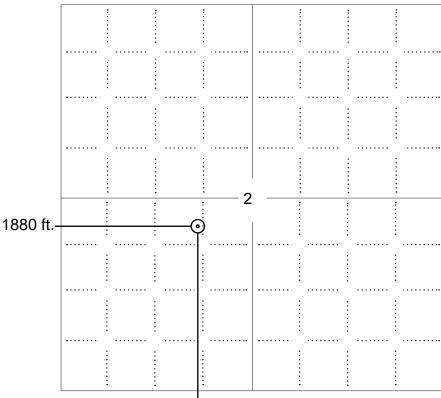
Plat of acreage attributable to a well in a prorated or spaced field

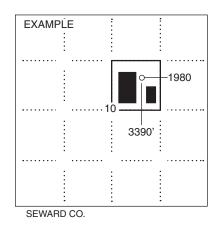
If the intended well is in a prorated or spaced field, please fully complete this side of the form. If the intended well is in a prorated or spaced field complete the plat below showing that the well will be properly located in relationship to other wells producing from the common source of supply. Please show all the wells and within 1 mile of the boundaries of the proposed acreage attribution unit for gas wells and within 1/2 mile of the boundaries of the proposed acreage attribution unit for oil wells.

API No. 15	
Operator:	Location of Well: County:
Lease:	feet from N / S Line of Section
Well Number:	feet from E / W Line of Section
Field:	Sec Twp S. R
Number of Acres attributable to well:	Is Section: Regular or Irregular
	If Section is Irregular, locate well from nearest corner boundary. Section corner used: NE NW SE SW

PLAT

(Show location of the well and shade attributable acreage for prorated or spaced wells.) (Show footage to the nearest lease or unit boundary line.)





NOTE: In all cases locate the spot of the proposed drilling locaton.

2250 ft.

In plotting the proposed location of the well, you must show:

- 1. The manner in which you are using the depicted plat by identifying section lines, i.e. 1 section, 1 section with 8 surrounding sections, 4 sections, etc.
- 2. The distance of the proposed drilling location from the south / north and east / west outside section lines.
- 3. The distance to the nearest lease or unit boundary line (in footage).
- 4. If proposed location is located within a prorated or spaced field a certificate of acreage attribution plat must be attached: (C0-7 for oil wells; CG-8 for gas wells).



KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1016911

Form CDP-1
April 2004
Form must be Typed

APPLICATION FOR SURFACE PIT

Submit in Duplicate

Operator Name:			License Number:			
Operator Address:						
Contact Person:		Phone Number:				
Lease Name & Well No.:		Pit Location (QQQQ):				
Type of Pit: Emergency Pit Burn Pit Settling Pit Drilling Pit Workover Pit Haul-Off Pit (If WP Supply API No. or Year Drilled)	Pit is: Proposed If Existing, date complete capacity:		SecTwpR East West Feet from North / South Line of Section Feet from East / West Line of Section			
	(bbls)		County			
Is the pit located in a Sensitive Ground Water Area? Yes No			Chloride concentration: mg/l (For Emergency Pits and Settling Pits only)			
Is the bottom below ground level? Yes No	Artificial Liner?		How is the pit lined if a plastic liner is not used?			
Pit dimensions (all but working pits):	Length (feet)		Width (feet) N/A: Steel Pits			
Depth fr	om ground level to de	eepest point:	(feet) No Pit			
material, thickness and installation procedure	ł.	liner integrity, in	ncluding any special monitoring.			
Distance to nearest water well within one-mile	of pit	Depth to shallo Source of infor	west fresh waterfeet.			
feet Depth of water wellfeet			redwell owner electric logKDWR			
Emergency, Settling and Burn Pits ONLY:		Drilling, Work	over and Haul-Off Pits ONLY:			
Producing Formation:		Type of materia	al utilized in drilling/workover:			
Number of producing wells on lease:		Number of working pits to be utilized:				
Barrels of fluid produced daily:		Abandonment	procedure:			
Does the slope from the tank battery allow all flow into the pit? Yes No	spilled fluids to	Drill pits must be closed within 365 days of spud date.				
Submitted Electronically						
	KCC	OFFICE USE O	NLY Steel Pit RFAC RFAS			
Date Received: Permit Num	ıber:	Perm	it Date: Lease Inspection:			