For KCC Use:

| Effective | Date: |  |
|-----------|-------|--|
|           |       |  |

| District | # |   |
|----------|---|---|
|          |   | _ |

|  | SGA? | Yes | No |
|--|------|-----|----|
|--|------|-----|----|

# CORRECTION #1

1019927

KANSAS CORPORATION COMMISSION **OIL & GAS CONSERVATION DIVISION** 

October 2007 Form must be Typed Form must be Signed All blanks must be Filled

Form C-1

### NOTICE OF INTENT TO DRILL

Must be approved by KCC five (5) days prior to commencing well

| Expected Spud Date:                                                                                                                                                                                                        |                                                                  |      |                                                        | Spot Description:                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                        |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------|------|--------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|
|                                                                                                                                                                                                                            | month                                                            | day  | year                                                   | (a/a/a/a) Sec TwpS. F                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                        |
| OPERATOR: License#                                                                                                                                                                                                         |                                                                  |      |                                                        | feet from N /                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | S Line of Section      |
| Name:                                                                                                                                                                                                                      |                                                                  |      |                                                        | feet from E /                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | W Line of Section      |
| Address 1:                                                                                                                                                                                                                 |                                                                  |      |                                                        | Is SECTION: Regular Irregular?                                                                                                                                                                                                                                                                                                                                                                                                                                                |                        |
| Address 2:                                                                                                                                                                                                                 |                                                                  |      |                                                        | (Note: Locate well on the Section Plat on revers                                                                                                                                                                                                                                                                                                                                                                                                                              | se side)               |
| City:                                                                                                                                                                                                                      | State:                                                           | Zip: | +                                                      | County:                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | *                      |
| Contact Person:                                                                                                                                                                                                            |                                                                  |      |                                                        | Lease Name:                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                        |
| Phone:                                                                                                                                                                                                                     |                                                                  |      |                                                        | Field Name:                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                        |
| CONTRACTOR: License#_                                                                                                                                                                                                      |                                                                  |      |                                                        | Is this a Prorated / Spaced Field?                                                                                                                                                                                                                                                                                                                                                                                                                                            | Yes No                 |
| Name:                                                                                                                                                                                                                      |                                                                  |      |                                                        | Target Formation(s):                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                        |
| Well Drilled For:         Oil       Enh Re         Gas       Storag         Dispos         Seismic ;# of         Other:         If OWWO: old well in         Operator:         Well Name:         Original Completion Date | Well Class<br>ec Infield<br>e Pool E<br>al Wildca<br>Holes Other | Type | <i>Equipment:</i><br>Mud Rotary<br>Air Rotary<br>Cable | Nearest Lease or unit boundary line (in footage):         Ground Surface Elevation:         Water well within one-quarter mile:         Public water supply well within one mile:         Depth to bottom of fresh water:         Depth to bottom of usable water:         Surface Pipe by Alternate:         I         Length of Surface Pipe Planned to be set:         Length of Conductor Pipe (if any):         Projected Total Depth:         Formation at Total Depth: | feet MSL Yes No Yes No |
| Directional, Deviated or Hori                                                                                                                                                                                              | zontal wallbara?                                                 |      | Yes No                                                 | Water Source for Drilling Operations:                                                                                                                                                                                                                                                                                                                                                                                                                                         |                        |
| If Yes, true vertical depth:                                                                                                                                                                                               |                                                                  |      |                                                        | Well Farm Pond Other:                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                        |
| Bottom Hole Location:                                                                                                                                                                                                      |                                                                  |      |                                                        | DWR Permit #:                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                        |
| KCC DKT #:                                                                                                                                                                                                                 |                                                                  |      |                                                        | (Note: Apply for Permit with DWR )                                                                                                                                                                                                                                                                                                                                                                                                                                            |                        |
|                                                                                                                                                                                                                            |                                                                  |      |                                                        | Will Cores be taken?                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Yes No                 |
|                                                                                                                                                                                                                            |                                                                  |      |                                                        | If Yes, proposed zone:                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                        |

#### **AFFIDAVIT**

The undersigned hereby affirms that the drilling, completion and eventual plugging of this well will comply with K.S.A. 55 et. seq. It is agreed that the following minimum requirements will be met:

1. Notify the appropriate district office *prior* to spudding of well;

- 2. A copy of the approved notice of intent to drill shall be posted on each drilling rig;
- 3. The minimum amount of surface pipe as specified below shall be set by circulating cement to the top; in all cases surface pipe shall be set through all unconsolidated materials plus a minimum of 20 feet into the underlying formation.
- 4. If the well is dry hole, an agreement between the operator and the district office on plug length and placement is necessary prior to plugging;
- 5. The appropriate district office will be notified before well is either plugged or production casing is cemented in;
- 6. If an ALTERNATE II COMPLETION, production pipe shall be cemented from below any usable water to surface within 120 DAYS of spud date. Or pursuant to Appendix "B" - Eastern Kansas surface casing order #133,891-C, which applies to the KCC District 3 area, alternate II cementing must be completed within 30 days of the spud date or the well shall be plugged. In all cases, NOTIFY district office prior to any cementing.

#### Submitted Electronically

|                                                  | Remember to:                                                                                                                                                               |
|--------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| For KCC Use ONLY                                 | - File Drill Pit Application (form CDP-1) with Intent to Drill;                                                                                                            |
| API # 15                                         | - File Completion Form ACO-1 within 120 days of spud date;                                                                                                                 |
| Conductor pipe required feet                     | <ul> <li>File acreage attribution plat according to field proration orders;</li> <li>Notify appropriate district office 48 hours prior to workover or re-entry;</li> </ul> |
| Minimum surface pipe required feet per ALT. I II | - Submit plugging report (CP-4) after plugging is completed (within 60 days);                                                                                              |
| Approved by:                                     | - Obtain written approval before disposing or injecting salt water.                                                                                                        |
| This authorization expires:                      | - If this permit has expired (See: authorized expiration date) please check the box below and return to the address below.                                                 |
|                                                  | Well Not Drilled - Permit Expired Date:                                                                                                                                    |
| Spud date: Agent:                                | Signature of Operator or Agent:                                                                                                                                            |
| · · · · · · · · · · · · · · · · · · ·            |                                                                                                                                                                            |



1019927

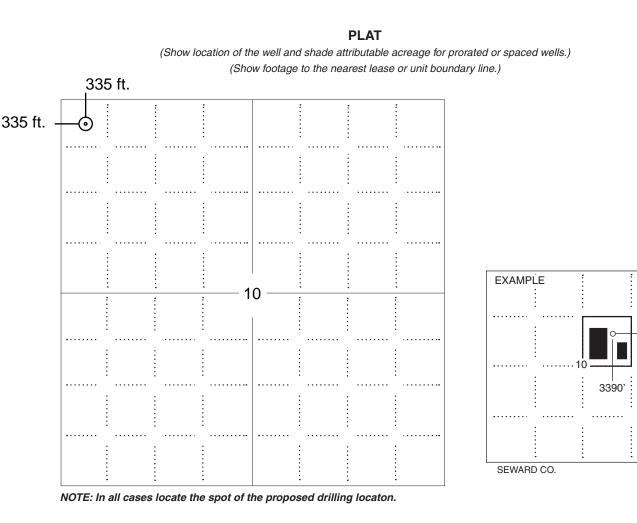
1980

#### 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 gas wells and within 1/2 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 gas wells and within 1/2 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 gas wells and within 1/2 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 gas wells and within 1/2 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 gas wells and within 1/2 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 gas wells and within 1/2 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 gas wells and within 1/2 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 gas wells and within 1/2 mile of the boundaries of the proposed acreage attribution unit for gas wells and wells attribute acreage attri

| 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 E W                                                   |
| Number of Acres attributable to well: | Is Section: Regular or Irregular                                   |
| QTR/QTR/QTR/QTR of acreage:           |                                                                    |
|                                       | If Section is Irregular, locate well from nearest corner boundary. |
|                                       | Section corner used: NE NW SE SW                                   |



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).
- 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).

CORRECTION #1

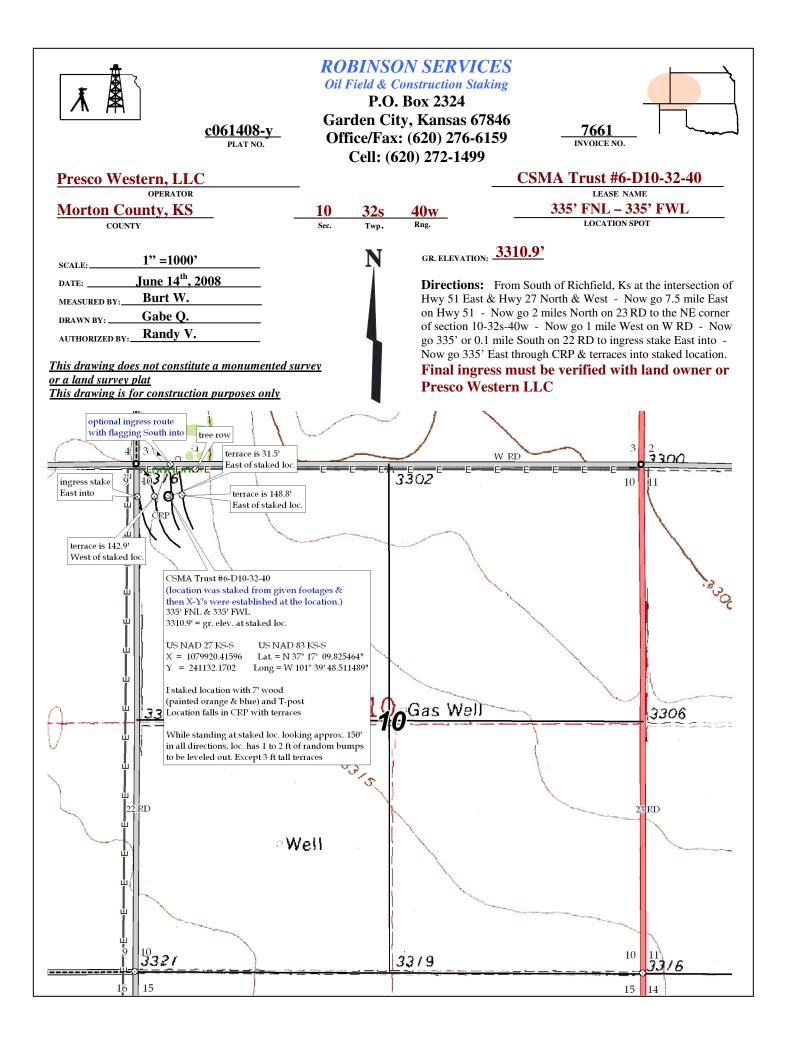
Form CDP-1 April 2004 Form must be Typed

## **APPLICATION FOR SURFACE PIT**

Submit in Dunlicato

| Operator Name:                                                                                                                                         |                     |                                                 | License Number:                                                     |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|-------------------------------------------------|---------------------------------------------------------------------|--|
| •                                                                                                                                                      |                     |                                                 |                                                                     |  |
| Operator Address:                                                                                                                                      |                     |                                                 |                                                                     |  |
| Contact Person:                                                                                                                                        |                     |                                                 | Phone Number:                                                       |  |
| Lease Name & Well No .:                                                                                                                                | 1                   |                                                 | Pit Location (QQQQ):                                                |  |
| Type of Pit:                                                                                                                                           | Pit is:             |                                                 |                                                                     |  |
| Emergency Pit Burn Pit                                                                                                                                 | Proposed            | Existing                                        | SecTwpR East West                                                   |  |
| Settling Pit Drilling Pit                                                                                                                              | If Existing, date o | constructed:                                    | Feet from North / South Line of Section                             |  |
| Workover Pit Haul-Off Pit                                                                                                                              | Pit capacity:       |                                                 | Feet from East / West Line of Section                               |  |
| (If WP Supply API No. or Year Drilled)                                                                                                                 |                     | (bbls)                                          | Coun                                                                |  |
| Is the pit located in a Sensitive Ground Water                                                                                                         | Area? Yes           | No                                              | Chloride concentration: mg/                                         |  |
|                                                                                                                                                        |                     |                                                 | (For Emergency Pits and Settling Pits only)                         |  |
| Is the bottom below ground level?                                                                                                                      | Artificial Liner?   | No                                              | How is the pit lined if a plastic liner is not used?                |  |
|                                                                                                                                                        |                     | 4)                                              |                                                                     |  |
| Pit dimensions (all but working pits):                                                                                                                 |                     |                                                 | Width (feet)         N/A: Steel Pits          (feet)         No Pit |  |
| Distance to nearest water well within one-mile of pit     Depth to shallowest fresh waterfeet.       Source of information:     Source of information: |                     |                                                 |                                                                     |  |
| feet Depth of water wellfeetn                                                                                                                          |                     | measu                                           | measured well owner electric log KDWR                               |  |
| Emergency, Settling and Burn Pits ONLY: Drilling,                                                                                                      |                     |                                                 | ng, Workover and Haul-Off Pits ONLY:                                |  |
| Producing Formation:                                                                                                                                   |                     | Type of material utilized in drilling/workover: |                                                                     |  |
|                                                                                                                                                        |                     | Number of working pits to be utilized:          |                                                                     |  |
| Barrels of fluid produced daily:                                                                                                                       |                     |                                                 |                                                                     |  |
|                                                                                                                                                        |                     | Drill pits must b                               | t be closed within 365 days of spud date.                           |  |
| Submitted Electronically                                                                                                                               |                     |                                                 |                                                                     |  |
| KCC OFFICE USE ONLY Steel Pit RFAC RFAS                                                                                                                |                     |                                                 |                                                                     |  |
| Date Received: Permit Num                                                                                                                              | ber:                | Permi                                           | nit Date: Lease Inspection: Yes No                                  |  |

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202



## Summary of Changes

Lease Name and Number: CSMA Trust 6-D10-32-40 API/Permit #: 15-129-21839-00-00 Doc ID: 1019927 Correction Number: 1

Approved By: Rick Hestermann 06/25/2008

| Field Name                                  | Previous Value                                         | New Value                                              |
|---------------------------------------------|--------------------------------------------------------|--------------------------------------------------------|
| Depth Of Water Well                         | 125                                                    |                                                        |
| Depth to Shallowest<br>Fresh Water          | 125                                                    |                                                        |
| Fresh Water Information<br>Source: KDWR     | Yes                                                    | No                                                     |
| Ground Surface<br>Elevation                 | 3314                                                   | 3313                                                   |
| KCC Only - Approved<br>By                   | Rick Hestermann<br>04/15/2008                          | Rick Hestermann<br>06/25/2008                          |
| KCC Only - Date<br>Received                 | 04/14/2008                                             | 06/24/2008                                             |
| KCC Only - Permit Date                      | 04/15/2008                                             | 06/25/2008                                             |
| KCC Only - Regular<br>Section Quarter Calls | SW SW NE NW                                            | SE NW NW NW                                            |
| LocationInfoLink                            | https://solar.kgs.ku.edu/<br>kcc/detail/locationInform | https://solar.kgs.ku.edu/<br>kcc/detail/locationInform |
| Nearest Lease Or Unit<br>Boundary           | ation.cfm?section=10&t<br>1306                         | ation.cfm?section=10&t<br>335                          |

## Summary of changes for correction 1 continued

| Field Name                                            | Previous Value                                                          | New Value                                                 |
|-------------------------------------------------------|-------------------------------------------------------------------------|-----------------------------------------------------------|
| Number of Feet East or<br>West From Section Line      | 1329                                                                    | 335                                                       |
| Number of Feet East or<br>West From Section Line      | 1329                                                                    | 335                                                       |
| Number of Feet North or South From Section            | 1306                                                                    | 335                                                       |
| Line<br>Number of Feet North<br>or South From Section | 1306                                                                    | 335                                                       |
| Line<br>Quarter Call 2                                | NE                                                                      | NW                                                        |
| Quarter Call 2                                        | NE                                                                      | NW                                                        |
| Quarter Call 3                                        | SW                                                                      | NW                                                        |
| Quarter Call 3                                        | SW                                                                      | NW                                                        |
| Quarter Call 4 -<br>Smallest                          | SW                                                                      | SE                                                        |
| Quarter Call 4 -<br>Smallest                          | SW                                                                      | SE                                                        |
| SaveLink                                              | //kcc/detail/operatorE<br>ditDetail.cfm?docID=10<br>18161&rand=wShdosZJ | //kcc/detail/operatorE<br>ditDetail.cfm?docID=10<br>19927 |
| Well Number                                           | 6-C10-32-40                                                             | 6-D10-32-40                                               |