

| For KCC Use:      |  |
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| Effective Date: _ |  |
| District #        |  |
| 0040              |  |

# Kansas Corporation Commission Oil & Gas Conservation Division

Form C-1 October 2007 Form must be Typed

| PERATOR: Liconse#                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      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| Wolf Prison:   State:   Zip:   #   County:   Lease Name:   Well #;   Teld Name:   Field Name:   Fi   |                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Is SECTION: Regular Irregular? 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| Field Name:  Well Drilled For:  Well Class: Type Equipment:  Well Drilled For:  Well Class: Type Equipment:  Well Class: Type Equipment:  Well Class: Type Equipment:  Well Class: Type Equipment:  Gas Storage Pool Ext. Air Rotary  Well Air Rotary  Well Class: Wildcat Cable  Disposal Wildcat Cable  Disposal Wildcat Cable  Despite to bottom of fresh water:  Dopth  | ontact Person:                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                           |                                                                                                                                                                                                                                                                                                                         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| Target Formation(s):   Nearest Lass or unit boundary line (in footage):   Storage   Pool Ext.   Air Rotary   Disposal   Wildcat   Cable   Disposal   Wildcat   Disposal      | ONTRACTOR: License#                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                              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| Well Drilled For:   Well Class:   Type Equipment:   Ground Surface Elevation:   Ground Surface Ploe Parandon at Total Class Elevation:   Ground Surface Ploe Parandon at Total Depth:   Ground Surface Ploe Parandon at Total Class Elevation:   Ground Surface Plants Elevation:   Ground Surface Plant   | ame:                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                           |                                                                                                                                                              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| Gas   Storage   Pool Ext.   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| Surface Pipe by Alternate:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             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| Deperator: Well Name: Original Completion Date: Original Total Depth: Projected Total Depth: Formation at Total Depth: Formation at Total Depth: Water Source for Drilling Operations: Well Farm Pond Other: DWR Permit #: Water Source for Drilling Operations: (Note: Apply for Permit with DWR   )  Will Cores be taken? If Yes, proposed zone: Well Farm Pond Other: Well Farm Pon | If OWWO: old well information as follo                                                                                                                                                                                                                                                                                                                                                                                         | ows:                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                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| Formation at Total Depth: water Source for Drilling Operations: wettion Hole Location: DCD EXT #:  ### Wetting Formation at Total Depth:    Wetting Formation at Total Depth:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          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| Water Source for Drilling Operations:  Water Source for Drilling Operation of the Suble Devented in:  Will Cores be taken?  Water Source for Brill With N.S.A. 55 et. seq.  Seq. Seq. Seq. Seq. Seq. Seq. Seq. Seq.                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                           |                                                                                                                                                                                                  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| rectional, Deviated or Horizontal wellbore?  Yes No  Well Farm Pond Other:  DWR Permit #:  Will Cores be taken?  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.  Is agreed that the following minimum requirements will be met:  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.  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;  The appropriate district office will be notified before well is either plugged or production casing is cemented in;  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.  **Remember to:**  File Completion Form ACO-1 with Intent to Drill;  File Completion Form ACO-1 within 120 days of spud date;  File Completion Form ACO-1 within 120 days of spud date;  File Completion Form ACO-1 within 120 days of spud date;  File Completion Form ACO-1 within 120 days of spud date;  File Completion Form ACO-1 within 120 days of spud date;  File Completion Form ACO-1 within 120 days of spud date;  File Completion Form ACO-1 within 120 days of spud date;  File Completion Form ACO-1 within 120 days of spud date;  File acreage attribution plat according to field proration orders;  Notify appropriate dist | - 3                                                                                                                                                                                                                                                                                                                      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| Will Cores be taken?    Will Cores be taken?   Yes   Will Cores be taken?   Yes   Yes   Will Cores be taken?   Yes   Yes |                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                 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| AFFIDAVIT ne undersigned hereby affirms that the drilling, completion and eventual plugging of this well will comply with K.S.A. 55 et. seq. 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. 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                                                                                                                                                                                                                                           |                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | If Yes, proposed zone:                                                                                                                                                                                                                                                                                                                                                   |
| bmitted Electronically  For KCC Use ONLY  API # 15                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <ol> <li>is agreed that the following minimum requ</li> <li>Notify the appropriate district office p</li> <li>A copy of the approved notice of inte</li> <li>The minimum amount of surface pipe through all unconsolidated materials</li> <li>If the well is dry hole, an agreement I</li> <li>The appropriate district office will be</li> <li>If an ALTERNATE II COMPLETION, Or pursuant to Appendix "B" - Easter</li> </ol> | uirements worior to spuce nt to drill she as specific plus a minimulative notified beforeduction production profuss as si | ill be met:  Iding of well;  Itali be posted  Itali be posted  Itali be osted  Itali be osted | on ea | ach of the distriction of the di | drilling rig; y circulating cement to the top; in all cases surface pipe shall be set underlying formation. ct office on plug length and placement is necessary prior to plugging; d or production casing is cemented in; from below any usable water to surface within 120 DAYS of spud date. 3,891-C, which applies to the KCC District 3 area, alternate II cementing |
| Minimum surface pipe requiredfeet per ALT. 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                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |       | _                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <ul> <li>File Drill Pit Application (form CDP-1) with Intent to Drill;</li> <li>File Completion Form ACO-1 within 120 days of spud date;</li> <li>File acreage attribution plat according to field proration orders;</li> </ul>                                                                                                                                          |
| Obtain within annually before dispersion on injecting cold water                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       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If this permit has expired (See: authorized expiration date) please                                                                                                                                                                                                                                                                                                    |

(This authorization void if drilling not started within 12 months of approval date.)

\_ Agent: \_

Spud date: \_

check the box below and return to the address below.

Well Not Drilled - Permit Expired Date:

Signature of Operator or Agent:



#### IN ALL CASES PLOT THE INTENDED WELL ON THE PLAT BELOW

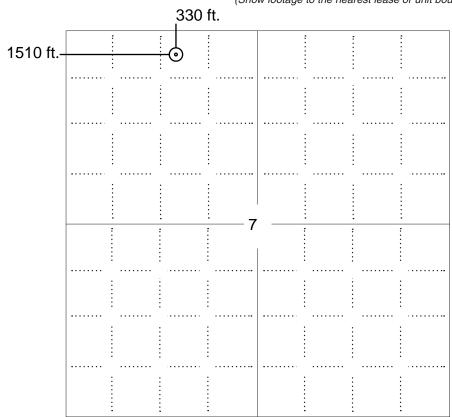
Plat of acreage attributable to a well in a prorated or spaced field

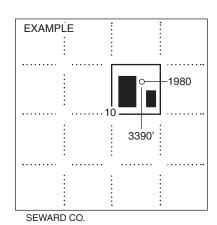
If the intended well is in a prorated or spaced field, please fully complete this side of the form. If the intended well is in a prorated or spaced field complete the plat below showing that the well will be properly located in relationship to other wells producing from the common source of supply. Please 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.

#### 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

26915 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)  Is the pit located in a Sensitive Ground Water  Is the bottom below ground level?  Yes No  Pit dimensions (all but working pits):  Depth from If the pit is lined give a brief description of the material, thickness and installation procedure | Artificial Liner?  Yes No  Length (feet)  om ground level to deepest point:  liner Describe proc |                                                                                                                                                                                                                      |                                |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                  |                                                                                                                                                                                                                      |                                |  |  |  |
| Distance to nearest water well within one-mile                                                                                                                                                                                                                                                                                                                                       | of pit                                                                                           | Depth to shallo                                                                                                                                                                                                      | west fresh waterfeet.          |  |  |  |
| feet Depth of water wellfeet                                                                                                                                                                                                                                                                                                                                                         |                                                                                                  |                                                                                                                                                                                                                      | redwell owner electric logKDWR |  |  |  |
| Emergency, Settling and Burn Pits ONLY:  Producing Formation:  Number of producing wells on lease:  Barrels of fluid produced daily:  Does the slope from the tank battery allow all flow into the pit?  Yes No  Submitted Electronically                                                                                                                                            |                                                                                                  | Drilling, Workover and Haul-Off Pits ONLY:  Type of material utilized in drilling/workover:  Number of working pits to be utilized:  Abandonment procedure:  Drill pits must be closed within 365 days of spud date. |                                |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                  |                                                                                                                                                                                                                      |                                |  |  |  |
| KCC OFFICE USE ONLY Steel Pit RFAC RFAS                                                                                                                                                                                                                                                                                                                                              |                                                                                                  |                                                                                                                                                                                                                      |                                |  |  |  |
| Date Received: Permit Num                                                                                                                                                                                                                                                                                                                                                            | ber:                                                                                             | Permi                                                                                                                                                                                                                | it Date: Lease Inspection:     |  |  |  |



Kathleen Sebelius, Governor Thomas E. Wright, Chairman Michael C. Moffet, Commissioner Joseph F. Harkins, Commissioner

March 31, 2009

Neil Sharp Running Foxes Petroleum Inc. 7060 S TUSCON WAY STE B CENTENNIAL, CO80112

Re: Drilling Pit Application AG-NH Lease Well No. 3-7-2 NW/4 Sec.07-33S-02E Sumner County, Kansas

## Dear Neil Sharp:

District staff has inspected the above referenced location and has determined that the reserve pit shall be constructed **without slots**, the bottom shall be flat and reasonably level, and the free fluids must be removed. The fluids are to be removed from the reserve pit within 72 hours of completion of drilling operations.

If production casing is set all completion fluids shall be removed from the working pits daily. NO completion fluids or non-exempt wastes shall be placed in the reserve pit.

The fluids should be taken to an authorized disposal well. Please call the District Office at (316) 630-4000 when the fluids have been removed. Please file form CDP-5 (August 2004), Exploration and Production Waste Transfer, within 30 days of fluid removal. Conservation division forms are available through our office and on the KCC web site: kcc.ks.gov/conservation/forms/

A copy of this letter should be posted in the doghouse along with the approved Intent to **Drill**. If you have any questions or concerns please feel free to contact the District Office at (316) 630-4000.