

For KCC Use:  
Effective Date: \_\_\_\_\_  
District # \_\_\_\_\_  
SGA?  Yes  No

**NOTICE OF INTENT TO DRILL**  
Must be approved by KCC five (5) days prior to commencing well

Expected Spud Date: \_\_\_\_\_  
month day year

OPERATOR: License# \_\_\_\_\_  
Name: \_\_\_\_\_  
Address 1: \_\_\_\_\_  
Address 2: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ + \_\_\_\_\_  
Contact Person: \_\_\_\_\_  
Phone: \_\_\_\_\_

CONTRACTOR: License# \_\_\_\_\_  
Name: \_\_\_\_\_

Well Drilled For:  Oil  Gas  Seismic ; \_\_\_\_\_ # of Holes  Other: \_\_\_\_\_  
Enh Rec  Storage  Disposal  
Infield  Pool Ext.  Wildcat  Other  
Well Class: \_\_\_\_\_  
Type Equipment:  Mud Rotary  Air Rotary  Cable

If OWWO: old well information as follows:  
Operator: \_\_\_\_\_  
Well Name: \_\_\_\_\_  
Original Completion Date: \_\_\_\_\_ Original Total Depth: \_\_\_\_\_

Directional, Deviated or Horizontal wellbore?  Yes  No  
If Yes, true vertical depth: \_\_\_\_\_  
Bottom Hole Location: \_\_\_\_\_  
KCC DKT #: \_\_\_\_\_

Spot Description: \_\_\_\_\_  
\_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  E  W  
(00/00) \_\_\_\_\_ feet from  N /  S Line of Section  
\_\_\_\_\_ feet from  E /  W Line of Section

Is SECTION:  Regular  Irregular?  
(Note: Locate well on the Section Plat on reverse side)

County: \_\_\_\_\_  
Lease Name: \_\_\_\_\_ Well #: \_\_\_\_\_

Field Name: \_\_\_\_\_  
Is this a Prorated / Spaced Field?  Yes  No

Target Formation(s): \_\_\_\_\_  
Nearest Lease or unit boundary line (in footage): \_\_\_\_\_

Ground Surface Elevation: \_\_\_\_\_ feet MSL  
Water well within one-quarter mile:  Yes  No

Public water supply well within one mile:  Yes  No  
Depth to bottom of fresh water: \_\_\_\_\_

Depth to bottom of usable water: \_\_\_\_\_  
Surface Pipe by Alternate:  I  II

Length of Surface Pipe Planned to be set: \_\_\_\_\_  
Length of Conductor Pipe (if any): \_\_\_\_\_

Projected Total Depth: \_\_\_\_\_  
Formation at Total Depth: \_\_\_\_\_

Water Source for Drilling Operations:  
 Well  Farm Pond Other: \_\_\_\_\_

DWR Permit #: \_\_\_\_\_  
(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**

**For KCC Use ONLY**  
API # 15 - \_\_\_\_\_  
Conductor pipe required \_\_\_\_\_ feet  
Minimum surface pipe required \_\_\_\_\_ feet per ALT. I II  
Approved by: \_\_\_\_\_  
**This authorization expires:** \_\_\_\_\_  
(This authorization void if drilling not started within 12 months of approval date.)  
Spud date: \_\_\_\_\_ Agent: \_\_\_\_\_

**Remember to:**

- File Drill Pit Application (form CDP-1) with Intent to Drill;
- File Completion Form ACO-1 within 120 days of spud date;
- File acreage attribution plat according to field proration orders;
- Notify appropriate district office 48 hours prior to workover or re-entry;
- Submit plugging report (CP-4) after plugging is completed (within 60 days);
- Obtain written approval before disposing or injecting salt water.
- 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: \_\_\_\_\_  
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: \_\_\_\_\_

Lease: \_\_\_\_\_

Well Number: \_\_\_\_\_

Field: \_\_\_\_\_

Number of Acres attributable to well: \_\_\_\_\_

QTR/QTR/QTR/QTR of acreage: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Location of Well: County: \_\_\_\_\_

\_\_\_\_\_ feet from  N /  S Line of Section

\_\_\_\_\_ feet from  E /  W Line of Section

Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  E  W

Is Section:  Regular or  Irregular

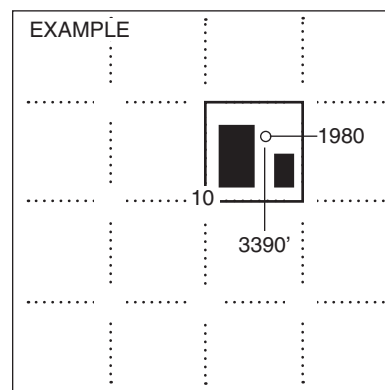
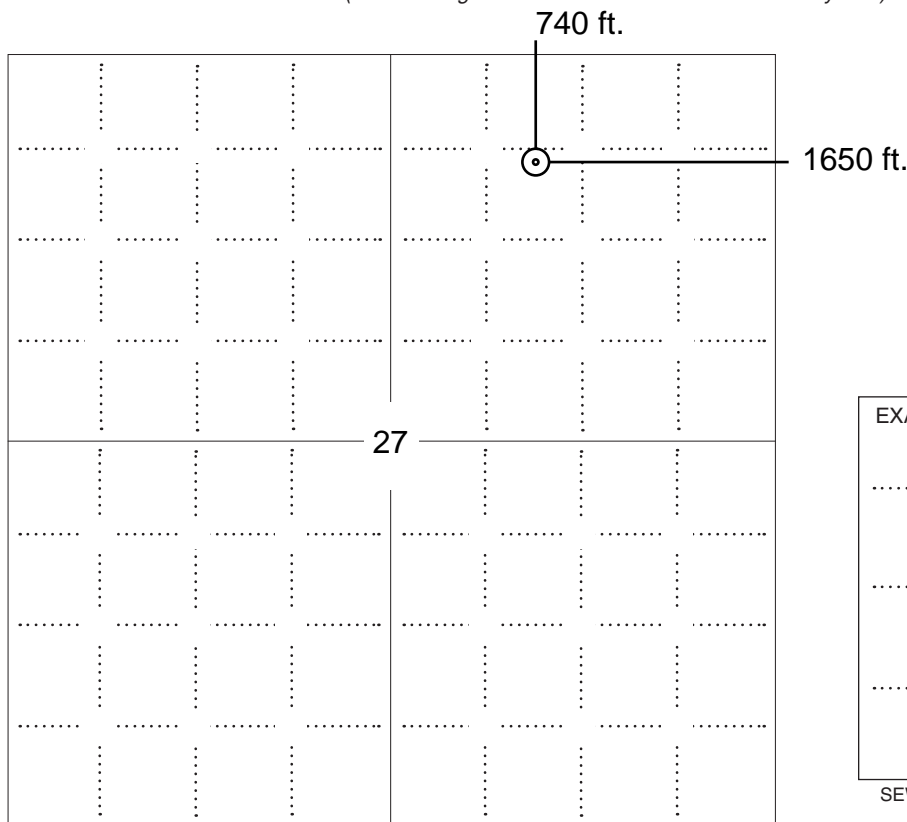
**If Section is Irregular, locate well from nearest corner boundary.**

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).

**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: <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Burn Pit <input type="checkbox"/> Settling Pit <input type="checkbox"/> Drilling Pit <input type="checkbox"/> Workover Pit <input type="checkbox"/> Haul-Off Pit <i>(If WP Supply API No. or Year Drilled)</i>		Pit is: <input type="checkbox"/> Proposed <input type="checkbox"/> Existing If Existing, date constructed: _____ Pit capacity: _____ (bbls)	
Is the pit located in a Sensitive Ground Water Area? <input type="checkbox"/> Yes <input type="checkbox"/> No		Chloride concentration: _____ mg/l <i>(For Emergency Pits and Settling Pits only)</i>	
Is the bottom below ground level? <input type="checkbox"/> Yes <input type="checkbox"/> No		Artificial Liner? <input type="checkbox"/> Yes <input type="checkbox"/> No	
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 from ground level to deepest point: _____ (feet)    _____ No Pit			
If the pit is lined give a brief description of the liner material, thickness and installation procedure.		Describe procedures for periodic maintenance and determining liner integrity, including any special monitoring.	
Distance to nearest water well within one-mile of pit _____ feet    Depth of water well _____ feet		Depth to shallowest fresh water _____ feet. Source of information: _____ measured    _____ well owner    _____ electric log    _____ KDWR	
<b>Emergency, Settling and Burn Pits ONLY:</b> Producing Formation: _____ Number of producing wells on lease: _____ Barrels of fluid produced daily: _____ Does the slope from the tank battery allow all spilled fluids to flow into the pit? <input type="checkbox"/> Yes <input type="checkbox"/> No		<b>Drilling, Workover and Haul-Off Pits ONLY:</b> 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.	
Submitted Electronically			

**KCC OFFICE USE ONLY**

Steel Pit

RFAC

RFAS

Date Received: \_\_\_\_\_ Permit Number: \_\_\_\_\_ Permit Date: \_\_\_\_\_ Lease Inspection:  Yes  No

Submit To:

CHIEF ENGINEER  
Division of Water Resources  
Kansas Department of Agriculture  
109 SW 9<sup>th</sup> Street, 2nd Floor  
Topeka, KS 66612-1283  
[www.ksda.gov/dwr](http://www.ksda.gov/dwr)

**APPLICATION FOR  
TEMPORARY PERMIT**

GROUNDWATER  
 SURFACE WATER  
(check one)

**WATER RESOURCES  
RECEIVED**

OCT 13 2009

1:06 PM

KS DEPT OF AGRICULTURE



State of Kansas

FO 3  
GMD \_\_\_\_\_  
MEETS \_\_\_\_\_  
K.A.R. 5- \_\_\_\_\_  
BY KAK  
DATE 10/13/2009

**STATUTORY FILING FEE OF \$200.00 MUST ACCOMPANY THIS APPLICATION**  
(Make check payable to the Kansas Department of Agriculture)

20090275

1. Applicant: (Please print or type)  
Name Black Diamond Oil, Inc.  
Street PO Box 641  
City and State Hays, KS 67601  
Zip Code 67601 Telephone No. (785) 625-5891  
Social Security I.D. No. \_\_\_\_\_  
and/or Taxpayer I.D. No. 480924145

6. Period of use (6 months maximum):  
Commencing date: 10-8-2009-10/14/09  
Ending Date: 12-8-2009

7. Location of the proposed point of diversion shall be indicated on the diagram below. Use the center section.

If surface water, indicate on the diagram the course of the stream, and its name.

2. Location of Point of Diversion:  
Sec. 23, Twp. 8, Rng. 19, (E/W),  
Rooks \_\_\_\_\_ County, Kansas.

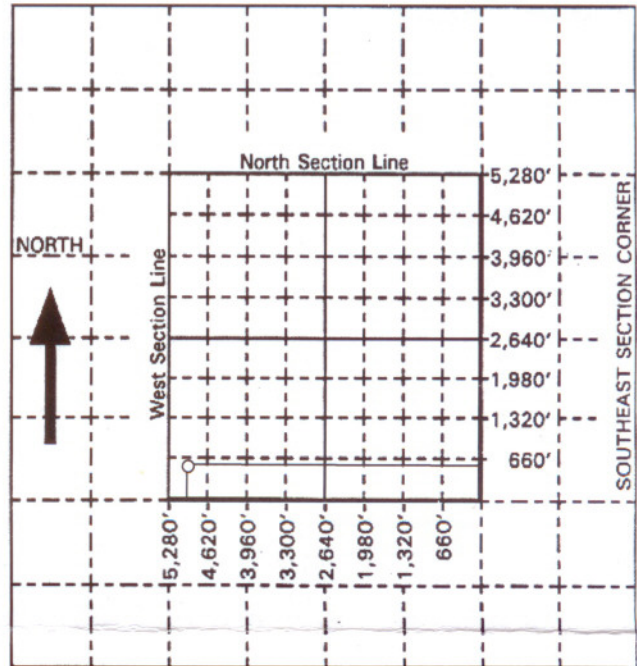
The scale of the diagram is 2 inches = 1 mile  
Each small square represents 10 acres

Distance from Southeast Corner of Section:  
500 feet North from Southeast Corner  
4950 feet West from Southeast Corner

Existing water right? Yes  No   
If yes, File No. \_\_\_\_\_

Pending application? Yes  No   
If yes, File No. \_\_\_\_\_

3. Water Use Data:  
Proposed Max. Pumping Rate (gpm) 40  
Amount Requested (gallons) 400,000  
(not to exceed one million gallons unless for dewatering)  
Depth of Well (feet) \_\_\_\_\_, OR  
Name of Stream Lost Creek



4. Water is to be used for (briefly describe proposed use):  
Drilling Oil Well

5. Location of place of use:  
E/2 NW NE Section 27-8-19

For Office Use Only: Code TMP Fee \$ 200 TR # \_\_\_\_\_ Receipt Date 10-13-09 Check # 19236

WATER RESOURCES RECEIVED  
OCT 13 2009  
KS DEPT OF AGRICULTURE

8. For groundwater use, list below all wells within 1/2 mile of the proposed well, and plot locations upon the diagram on reverse side. If additional space is needed, attach sheet.

Other wells -

Well A Owner(s): \_\_\_\_\_  
Address: \_\_\_\_\_

Well B Owner(s): \_\_\_\_\_  
Address: \_\_\_\_\_

9. For surface water use, list below the names and addresses of all landowners from a point 1/2 mile upstream to a point 1/2 mile downstream of the tract of land upon which the point of diversion is located. If additional space is needed, attach sheet.

Tract A Owner(s): Steve Fellhoelter  
Address: 2190 16 Road, Plainville, KS 67663

Tract B Owner(s): \_\_\_\_\_  
Address: \_\_\_\_\_

\* 10. The owner of the point of diversion, is (please print):  
KAK/DWR Tracy Fellhoelter Living Trust (SW 1/4 SW 1/4) (785) 434-7498  
(name, address and telephone number)

**You must provide evidence of legal access to, or control of, the point of diversion of water, from the landowner or the landowner's authorized representative. Provide a copy of a recorded deed, lease, easement or other document with this application. In lieu thereof, you may sign the following sworn statement:**

I have legal access to, or control of, the point of diversion described in this application from the landowner or the landowner's authorized representative. I declare under penalty of perjury that the foregoing is true and correct.  
Executed on October 8, 2009.  
Applicant's Signature

11. The applicant states that the information set forth herein is true and accurate to the best of his/her knowledge.

Tracy Fellhoelter Signature of Applicant or \_\_\_\_\_ Authorized Representative 10/9/09 Date  
Kenneth Verhige Applicant's Name Printed \_\_\_\_\_ Title

**DO NOT WRITE BELOW THIS LINE**

**CONDITIONS OF APPROVAL:**

The applicant shall maintain records from which the quantity of water actually diverted may be readily determined.

The use of water herein authorized shall not be made so as to impair any use under existing water rights or prejudicially and unreasonably affect the public interest.

K.S.A. 82a-728 states in part "(a) except for the appropriation of water for the purpose of domestic use, . . . it shall be unlawful for any person to appropriate or threaten to appropriate water from any source without first applying for and obtaining a permit to appropriate water . . ."

Well(s) must be properly constructed by the well driller to comply with Article 30 of the Rules and Regulations as adopted by the Kansas Department of Health and Environment.

The Chief Engineer specifically retains jurisdiction in this matter with authority to make such reasonable reductions in the approved rate of diversion and quantity authorized, and such changes in other terms, conditions, and limitations set forth in this approval and permit to proceed as may be deemed to be in the public interest.

The water user diverting water under the authority of this permit shall not: 1) stop the flow of the stream at or below the point at which the water is diverted; or 2) pump at a rate in excess of the natural flow of the stream at the time the pumping occurs. **The stream flow shall not be stopped at the first riffle below the point of diversion while pumping under the authority of this permit.**

APPLICATION APPROVED  
Permit Number: 20090275  
Date Issued: October 14, 2009  
Expiration Date: December 8, 2010

David W Barfield  
FOR: David W Barfield, P.E.  
Chief Engineer  
Division of Water Resources  
Kansas Department of Agriculture

The point of diversion authorized by the approval of this application for temporary permit is more particularly described as being located in the Southwest Quarter of the Southwest Quarter of the Southwest Quarter (SW 1/4 SW 1/4 SW 1/4) of Section 23, Township 8 South, Range 19 West, Rooks County, Kansas.

This is a final agency action. If you choose to appeal this decision or any finding or part thereof, you must do so by filing a petition for review in the manner prescribed by the Kansas Act for Judicial Review and Civil Enforcement of Agency Actions (KJRA K.S.A. 77-601 et. seq.) within 30 days of service of this order. Your appeal must be made with the appropriate district court for the district of Kansas. The Chief Legal Counsel for the Kansas Department of Agriculture, 109 SW 9th Street, 4th Floor, Topeka, Kansas 66612, is the agency officer who will receive service of a petition for judicial review on behalf of the Department of Agriculture, Division of Water Resources. If you have questions or would like clarification concerning this order, you may contact the Chief Engineer.

## Summary of Changes

Lease Name and Number: LT 1

API/Permit #: 15-163-23831-00-00

Doc ID: 1032213

Correction Number: 1

Approved By: Rick Hestermann 10/16/2009

Field Name	Previous Value	New Value
DWR Permit Number		20090275
Drilling Water Source Other - Text entered		Lost Creek
KCC Only - Approved By	Rick Hestermann 10/12/2009	Rick Hestermann 10/16/2009
KCC Only - Date Received	10/08/2009	10/16/2009
KCC Only - Lease Inspection	Yes	No
Save Link	../../kcc/detail/operatorE ditDetail.cfm?docID=10 31899	../../kcc/detail/operatorE ditDetail.cfm?docID=10 32213
Water Source for Drilling Operations	Pond	Other

## Summary of Attachments

Lease Name and Number: LT 1

API: 15-163-23831-00-00

Doc ID: 1032213

Correction Number: 1

Approved By: Rick Hestermann 10/16/2009

Attachment Name