For KCC Use:

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

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

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| |

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1034154 Form must be Typed

Form C-1 October 2007

Form must be Signed

All blanks must be Filled

NOTICE OF INTENT TO DRILL

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

| Expected Spud Date: | | | | Spot Description: | |
|------------------------------|---------------------|----------------|---------------------|--|----------------------------|
| OPERATOR: License# | month | day | year | S. F | R E W S Line of Section |
| | | | | feet from E / | W Line of Section |
| Name: | | | | Is SECTION: Regular Irregular? | |
| Address 1: | | | | | |
| Address 2: City: | | | | (Note: Locate well on the Section Plat on rever | se side) |
| • | | - | | County: | |
| Contact Person: Phone: | | | | Lease Name: | Well #: |
| Filone | | | | Field Name: | |
| CONTRACTOR: License#_ | | | | Is this a Prorated / Spaced Field? | Yes No |
| Name: | | | | Target Formation(s): | |
| Well Drilled For: | Well Class | · Type | Equipment: | Nearest Lease or unit boundary line (in footage): | |
| | | <i>,</i> | | Ground Surface Elevation: | feet MSL |
| Oil Enh R | | | Mud Rotary | Water well within one-quarter mile: | Yes No |
| Gas Storag | · | | Air Rotary Cable | Public water supply well within one mile: | Yes No |
| Dispos | | | Cable | Depth to bottom of fresh water: | |
| Other: # 0 | | | | Depth to bottom of usable water: | |
| | | | | Surface Pipe by Alternate: | |
| If OWWO: old well | nformation as follo | ows: | | Length of Surface Pipe Planned to be set: | |
| | | | | Length of Conductor Pipe (if any): | |
| Operator: Well Name: | | | | Projected Total Depth: | |
| Original Completion Da | | | | Formation at Total Depth: | |
| Onginal Completion Da | .e | Oliginal Iolai | Deptil | Water Source for Drilling Operations: | |
| Directional, Deviated or Hor | izontal wellbore? | | Yes No | Well Farm Pond Other: | |
| If Yes, true vertical depth: | | | | | |
| Bottom Hole Location: | | | | DWR Permit #: | |
| KCC DKT #: | | | | (Note: Apply for Fernit 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 | File acreage attribution plat according to field proration orders; Notify appropriate district office 48 hours prior to workover or re-entry; |
| Minimum surface pipe requiredfeet 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. |
| (This authorization void if drilling not started within 12 months of approval date.) | Well Not Drilled - Permit Expired Date: |
| Spud date: Agent: | Signature of Operator or Agent: |
| | |



1034154

IN ALL CASES PLOT THE INTENDED WELL ON THE PLAT BELOW

Side Two

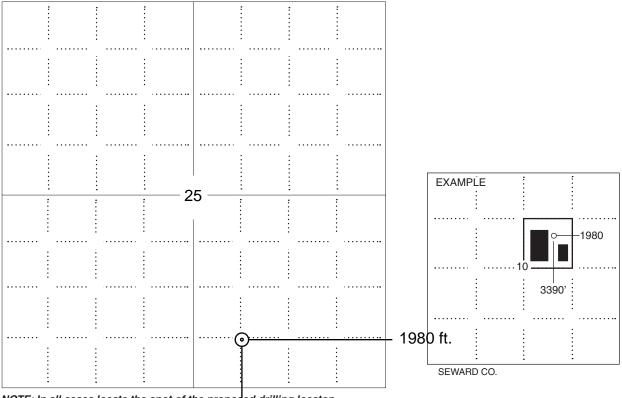
Plat of acreage attributable to a well in a prorated or spaced field

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 |
| | 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.

660 ft.

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

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

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1034154

Form CDP-1 April 2004 Form must be Typed

APPLICATION FOR SURFACE PIT

Submit in Duplicate

| Operator Name: | | _ | License Number: | | |
|--|--------------------------|------------------------------------|--|------|--|
| Operator Address: | | I | | | |
| Contact Person: | | | Phone Number: | | |
| Lease Name & Well No.: | | | Pit Location (QQQQ): | | |
| Type of Pit: | Pit is: | | · | | |
| Emergency Pit Burn Pit | Proposed | Existing | SecTwpR East [] \ | West | |
| Settling Pit Drilling Pit | If Existing, date c | onstructed: | Feet from North / South Line of Section | | |
| Uvorkover Pit Haul-Off Pit (<i>If WP Supply API No. or Year Drilled</i>) | Pit capacity: | (bbls) | Feet from East / West Line of | | |
| Is the pit located in a Sensitive Ground Water | Area? Yes | (,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | Chloride concentration: | | |
| | | | (For Emergency Pits and Settling Pits only) | mg/i | |
| Is the bottom below ground level? | Artificial Liner? | No | How is the pit lined if a plastic liner is not used? | | |
| Pit dimensions (all but working pits): | Length (fe | eet) | Width (feet)N/A: Steel F | Pits | |
| Depth fr | om ground level to d | eepest point: | (feet) No Pit | | |
| Distance to nearest water well within one-mile | e of pit | Depth to shallo Source of infor | west fresh waterfeet. mation: | | |
| feet Depth of water well | feet | measu | iredwell owner electric logK | DWR | |
| Emergency, Settling and Burn Pits ONLY: | | Drilling, Worke | over and Haul-Off Pits ONLY: | | |
| Producing Formation: | | Type of materia | al utilized in drilling/workover: | | |
| Number of producing wells on lease: | | Number of wor | king pits to be utilized: | | |
| Barrels of fluid produced daily: | | Abandonment | procedure: | | |
| Does the slope from the tank battery allow all flow into the pit? Yes No | spilled fluids to | Drill pits must b | be closed within 365 days of spud date. | | |
| Submitted Electronically | Submitted Electronically | | | | |
| | ксс | OFFICE USE O | NLY Steel Pit RFAC RFAS | | |
| Date Received: Permit Num | ber: | Permi | it Date: Lease Inspection: Yes [| No | |

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

| , FIELD SURVEYORS | (620) 672-649 | 1125093 | VOICE NO. |
|--|-------------------|-------------------|-----------|
| AGV CORPORATION | NO | Green | |
| Barber 25 33s 1 | <u>Ow CSWSE</u> | LOCATION | ·-,. |
| | X | ELEVATION: 1357! | 9r |
| AGV CORPORATION PO Box 377 Attica KS 67009-0377 | | | 5 |
| NTHORIZED BY LATTY Manns | | | |
| - | SCALE: 1" = 1000' | | |
| Technical services to assist in relocation of old well bore hole | | | |
| Set 5' wood stake at point of himeter reading. | 1 | | |
| Level to slight slope milo. | | | |
| - | <u> </u> | | - |
| | | | |
| | l | | |
| | 1 | | |
| | 25 | · - | |
| | 1 | | I |
| | | | |
| | | 1 | _ |
| - OLD WELL BORE HOLE | | | _ |
| | | | |
| | | - 1' 1 - 1 | |
| 11.1 | 1 | L) | |



NOTICE TO OPERATORS FILING INTENT TO DRILL FOR DISPOSAL OR ENHANCED RECOVERY INJECTION WELLS, (CLASS II INJECTION WELL)

The attached approved Notice of Intent to Drill indicates the proposed well is to be used for injection. An approved "Intent to Drill" does not approve injection authority as a Class II Injection Well in Kansas.

Before any well is used for injection purposes, the operator must file an application for injection authority in accordance with K.A.R. 82-3-401 and provide notice in accordance with K.A.R. 82-3-402. The Conservation Division must issue a written permit granting the application before commencement of injection.

The Conservation Division requirements and restrictions associated with Class II Injection are identified in K.A.R. 82-3-400 et seq of our regulations. Associated regulations governing drilling,completion and injection applications may be found in K.A.R. 82-3-135, Table I, Table II, in the Cedar Hills Sandstone Moratorium, (Docket #156,397-C), and the Eastern Kansas Surface Casing Order, (Docket #133,891-C).

If you have questions regarding the approval of injection authority, an injection application may be filed as a "Design Approval" before actual drilling and completion of the well occurs. If you have any questions or concerns regarding Class II injection wells or regulations, call the Underground Injection Control Department at 316-337-6200.

Failure to obtain commission approval before beginning injection is punishable by a penalty, shut-in of the well or both.



Mark Parkinson, Governor Thomas E. Wright, Chairman Michael C. Moffet, Commissioner Joseph F. Harkins, Commissioner

January 07, 2010

Larry G. Mans AGV Corp. PO Box 377 ATTICA, KS 67009-0377

Re: Drilling Pit Application GREEN SWD 1 SE/4 Sec.25-33S-10W Barber County, Kansas

Dear Larry G. Mans:

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 96 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 (620) 225-8888 when the fluids have been removed. Please file form CDP-5 (August 2008), Exploration and Production Waste Transfer, through SOLAR within 30 days of fluid removal.

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 (620) 225-8888.

STATE OF KANSAS STATE CORPORATION COMMISSION

Give All Information Completely Make Required Affidavit

Mate Reguired Affidavit Mail or Deliver Report to: Conservation Division State Corporation Con 211 No. Broadway Wichita, Kansas

NORTH ×,

| Location as "NE/CNW&SW&" or footage from lines_C_ | | | |
|---|-----------------|------------------------------|----------|
| Lease Owner Skelly Oil Company | · | | |
| Lease Name <u>A. C. Adams</u> | | Well No. | <u> </u> |
| Office Address P.O. Box 1650, Tulsa, | <u>Oklahoma</u> | | |
| Character of Well (completed as Oil, Gas or Dry Hole) | Dry Hole | | |
| Date well completed | December | 24. | . 19 5 |
| Application for plugging filed | December | 24. | 19 5 |
| Application for plugging approved | _December | 26. | 19 5 |
| Plugging commenced | | | |
| Plugging completed | | | |
| Reason for abandonment of well or producing formation _ | | | |
| If a producing well is abandoned, date of last production |) | | 19 |

Locate well correctly on above Section Plat

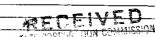
Name of Conservation Agent who supervised plugging of this well Mr. J. Lewis Brock Producing formation_ Depth to top____ - Bottom - Total Depth of Well 4653 Feet

Show depth and thickness of all water, oil and gas formations.

OIL, GAS OR WATER RECORDS CASING RECORD FORMATION CONTENT FROM TD DT) SIZE PUT IN PULLED DUT Mississippi Lime Dry 45441 46531 8-5/8" 31310" None

Describe in detail the manner in which the well was plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. If cement or other plugs were used, state the character of same and depth placed, from ___feet to ...feet for each plug set.

| 25 sacks of cement | 4653' to 4582' | |
|---------------------------|------------------|--|
| Heavy mud | 4582' to 300' | |
| 25 sacks of cement | 300' to 225' | |
| Mud | 225' to 35' | |
| <u>l0 sacks of cement</u> | <u>351 to 61</u> | |
| Surface_soil | <u>6t to 0t</u> | |



9 1958 JAN

CONSELVATION DIVISION Wichas, Kanses

55.

| (If additional description is necessary, use BACK of this sheet) Name of Plugging ContractorChas. Hulme Drlg. Contr. AddressBox 36, Great Bend, Kansas | | · · · · · · · · · · · · · · | | | |
|--|------------------|-----------------------------|---------------------------|-------|---------------------------------------|
| | | | | | |
| | Name of Plugging | Contractor | <u>aas. Hulme Drlg. C</u> | ontr. | |
| | | | | | · · · · · · · · · · · · · · · · · · · |

Kansas Reno STATE OF COUNTY OF.

H. E. Wamsley (employee of owner) or (REMOVERATE REPEATING of the above-described well, being first duly sworn on oath, says: That I have knowledge of the facts, statement d matters herein contained and the log of the above-described well as filed and that the same are true and correct. So help me God.

| | (Signature) | | |
|--|-------------|---------------------------------------|----------------|
| | Box 3 | 91, Hutchinson, Kan | sas |
| SUBSCRIBED AND SWORN TO before me this 8th | day of | January (Address) | 58 |
| | 9 | ushine 2 on | human |
| Ay commission expires April 7, 1959 | 0 | | Notary Public. |
| | | PLUGGING | |
| | | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | w |
| | | BOUK FAGE 72LINE 7 | |

fre

WELL PLUGGING RECORD