



For KCC Use:

Effective Date: _____

District # _____

SGA? Yes No

KANSAS CORPORATION COMMISSION 1036997
OIL & GAS CONSERVATION DIVISION

Form C-1

October 2007

Form must be Typed
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: _____
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: _____



1036997

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

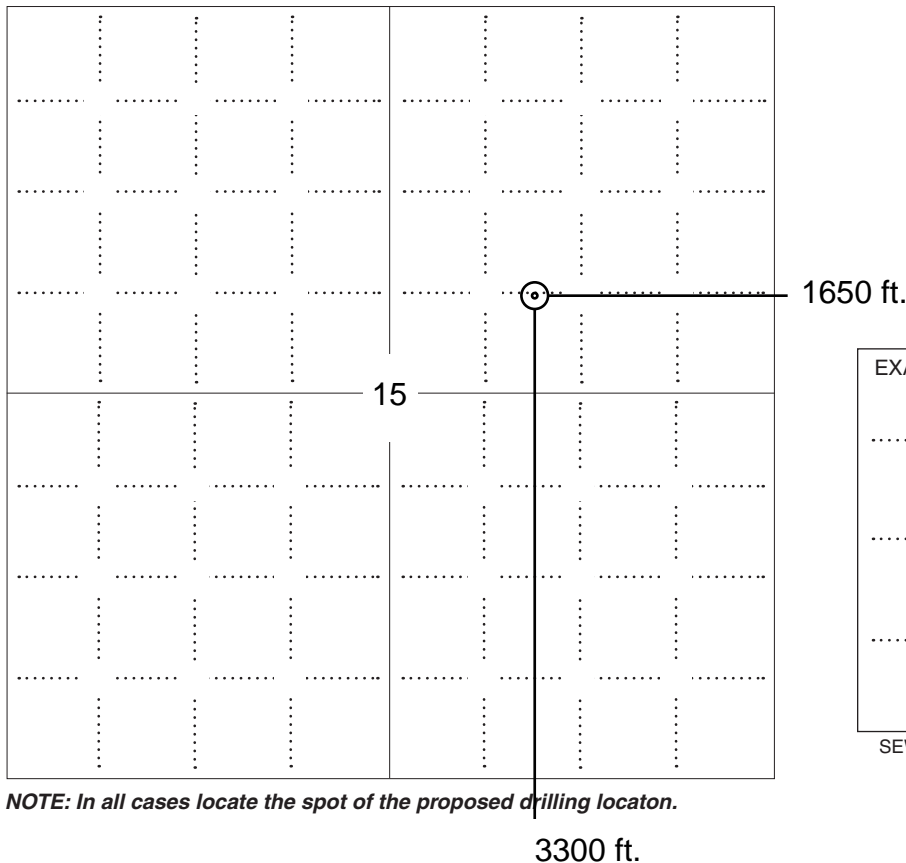
If Section is Irregular, locate well from nearest corner boundary.

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.

3300 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 1036997
OIL & GAS CONSERVATION DIVISION

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: <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	
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 spilled fluids to flow into the pit? <input type="checkbox"/> Yes <input type="checkbox"/> No		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.	
Submitted Electronically			

KCC OFFICE USE ONLY		Steel Pit	RFAC	RFAS
Date Received: _____	Permit Number: _____	Permit Date: _____	Lease Inspection: <input type="checkbox"/> Yes <input type="checkbox"/> No	

To: STATE CORPORATION COMMISSION
CONSERVATION DIVISION - PLUGGING SECTION
200 COLORADO DERBY BUILDING
WICHITA, KANSAS 67202

API NUMBER 15-163 - 02243 - 00 - 00

E2-SW-NE, Sec. 15, T 9 S, R 19 W

_____ feet from N/S section line

_____ feet from W/E section line

TECHNICIAN'S PLUGGING REPORT

Operator License # 5229

Lease Name Truck Well # 6

Operator: Phillips Pet. Co.
Name &
Address

County Rooks

P.O. Box 287
St. Bend, Kansas
67530

Well Total Depth 3508 feet 114.01

Conductor Pipe: Size — feet —

Surface Casing: Size 10 3/4 feet 221 w/175

Abandoned Oil Well Gas Well _____ Input Well _____ SWD Well _____ D&A _____

Other well as hereinafter indicated _____

Plugging Contractor Halliburton Emty License Number _____

Address Hays, Kansas 67601

Company to plug at: Hour: 10:00AM Day: 29 Month: 3 Year: 1984

VERBAL PLUGGING ORDERS GIVEN TO Gene Stearns

(company name) Phillips Pet. Co. (phone) _____

were: 7" int @ 3497 w/150 sx (1st stage) DV. @

1559" w/450 ske (circ to surf) C.T.P.P. @ 3460'

Perfs @ 3063 — 3348'

Ordered 280 sx 50% poz, 6% gel, 3% cc — 2000 gal —
3 sx bulls & 7" w. Plug.

Signed Dennis L. Hamel
(TECHNICIAN)

Plugging Operations attended by Agent?: All Part _____ None _____

Operations Completed: Hour: 12:30PM Day: 29 Month: 3 Year: 1984

ACTUAL PLUGGING REPORT

Empd down 7" csg. → 50 sx emt w/3 bulls
→ 20 ske gel (61 bbls 9# gal mud) → Release Wiper Plug
→ 230 ske emt.

Remarks: Halliburton

RECEIVED
STATE CORPORATION COMMISSION
APR 23 1984
4-23-84
CONSERVATION DIVISION
Wichita, Kansas

I hereby certify that the above plugging instructions were given as herein stated and that I (did/ did not) observe this plugging.

Signed Dennis L. Hamel
(TECHNICIAN)

INVOICED

DATE 4-23-84

INV. NO. _____

Orig - State Corp. Copy - B. A. Conner Copy - Mary Crump- Copy - Well File
 STATE OF KANSAS 9th Floor P. Twr. WELL PLUGGING RECORD OKC
 STATE CORPORATION COMMISSION K.A.R.-82-3-117
 200 Colorado Derby Building
 Wichita, Kansas 67202

TYPE OR PRINT
 NOTICE: Fill out completely
 and return to Cons. Div.
 office within 30 days.

API NUMBER KS-163-02243-00-00
 LEASE NAME Nech
 WELL NUMBER 6
 SPOT LOCATION S/2 SW NE
 SEC. 15 TWP. 9S RGE. 19 ~~KE~~ or (W)
 COUNTY Rooks
 Date Well Completed Jan. 1954
 Plugging Commenced 3-30-84
 Plugging Completed 3-30-84

LEASE OPERATOR Phillips Petroleum Company
 ADDRESS Box 287, Great Bend, Kansas 67530

PHONE # (316) 793-8421 OPERATORS LICENSE NO. 5229

Character of Well Oil
 (Oil, Gas, D&A, SWD, Input, Water Supply Well)

Did you notify the KCC/KDHE Joint District Office prior to plugging this well? Yes

Which KCC/KDHE Joint Office did you notify? District #6, Hays, Kansas

Is ACO-1 filed? No If not, is well log attached? Yes

Producing formation LKC Depth to top 3063 bottom 3368 T.D. PB 3460

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

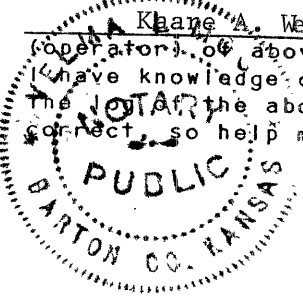
OIL, GAS OR WATER RECORDS			CASING RECORD			
Formation	Content	From	To	Size	Put in	Pulled out
Surface	Water	0'	221	10 3/4"	216'	-0-
Production	Oil & Water	0'	3497	7"	3519'	-0-

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 each set. Conn. Hallib to 7" csg and pumped 50 sx 50-50 Pozmix w/6% gel, 3% CaCl, 3 sx hulls, 20 sx gel, 7" wiper plug followed w/230 sx 50-50 Pozmix w/6% gel and 3% CaCl @ 3 BPM @ 100 psi. ISIP - Vac. Dennis Hamel, State Plugger, on location.

(If additional description is necessary, use BACK of this form.)

Name of Plugging Contractor Halliburton Services License No. _____
 Address Great Bend, Kansas 67530

STATE OF Kansas COUNTY OF Barton, ss.



Kaare A. Westby (employee of operator) or
 I, the undersigned, being first duly sworn on oath, says: That
 I have knowledge of the facts, statements, and matters herein contained and
 the above-described well has been plugged and the same are true and
 correct, so help me God. STATE CORPORATION COMMISSION

(Signature) Kaare Westby
 Kaare A. Westby, Agent
 (Address) Box 287, Great Bend, Kansas 67530

APR 13 1984
 4-13-84
 CONSERVATION DIVISION
 SUBSCRIPTIONS
 WICHITA, KANSAS

SWORN TO before me this 12 day of April, 1984

Velma L. Mog
 Notary Public
 Velma L. Mog

My Commission expires: February 15, 1988

EXPLORATION RECORD

Lease Block

Well 6

Formation Name	Top	Base	Remarks
Sand & shale	0	200	Klovicki 3075' D. F.
Shale	300	450	
Shale & shale	450	640	
Sand & shale	640	990	
Sand	990	1100	
Shale	1100	1200	
Sand	1200	1440	
Sandstone	1440	1490	
Sandstone, Shale & shale	1490	1690	
Shale & shale	1690	1705	
Shale & sand	1705	2050	
Shale	2050	2140	
Lime	2140	2200	
			Top:
			Klovicki 3075'
			Top of 3075'
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- 1 - 3075'
- 1 - C. J. Klovicki
- 1 - F. H. Klovicki
- 1 - 3075'
- 1 - Mrs. Klovicki DEP. OFF.
- 1 - Mrs. Klovicki DEP. OFF.

RECEIVED
STATE CORPORATION COMMISSION

APR 13 1984

CONSERVATION DIVISION
Wichita, Kansas

** Not permitted at 3075' T.D.
3508