



For KCC Use:

Effective Date: _____

District # _____

SGA? Yes No

KANSAS CORPORATION COMMISSION 1039485
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: _____

<i>Well Drilled For:</i>	<i>Well Class:</i>	<i>Type Equipment:</i>
<input type="checkbox"/> Oil	<input type="checkbox"/> Enh Rec	<input type="checkbox"/> Infield
<input type="checkbox"/> Gas	<input type="checkbox"/> Storage	<input type="checkbox"/> Pool Ext.
	<input type="checkbox"/> Disposal	<input type="checkbox"/> Wildcat
<input type="checkbox"/> Seismic ; _____ # of Holes	<input type="checkbox"/> Other	<input type="checkbox"/> Mud Rotary
<input type="checkbox"/> Other: _____		<input type="checkbox"/> Air Rotary
		<input type="checkbox"/> 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: _____



1039485

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

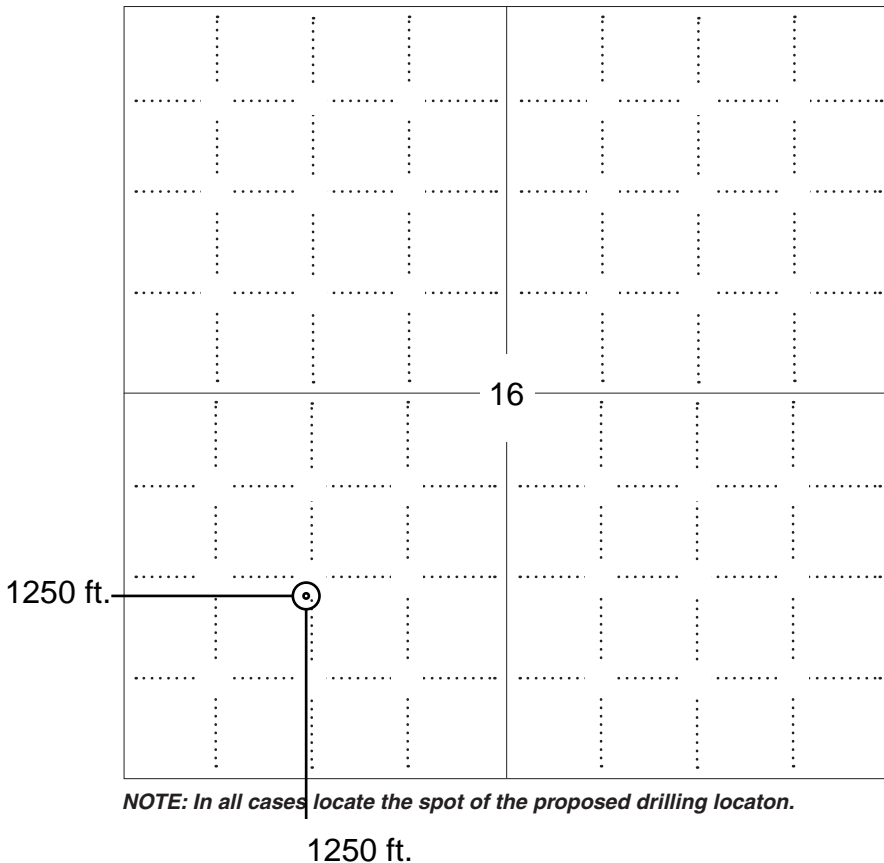
If Section is Irregular, locate well from nearest corner boundary.

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).



KANSAS CORPORATION COMMISSION 1039485
OIL & GAS CONSERVATION DIVISION

Form CDP-1
April 2004
Form must be Typed

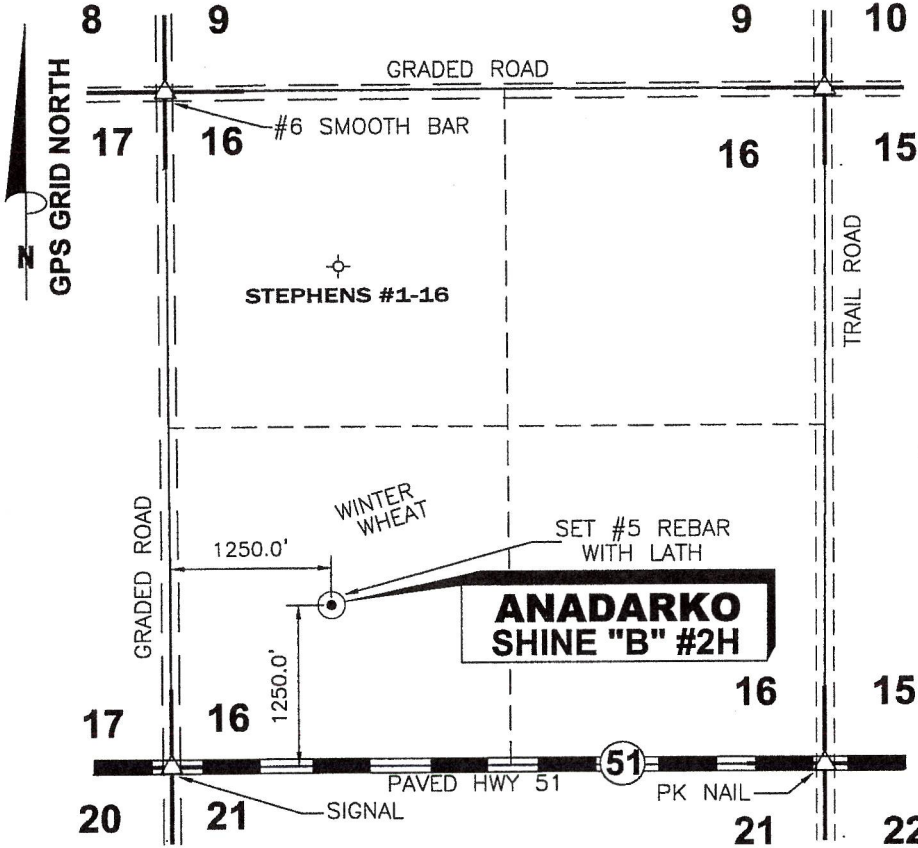
APPLICATION FOR SURFACE PIT

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			

T33S-R36W



DATE 2/25/2010

OPERATOR ANADARKO

WELL NAME SHINE "B" #2H

LOCATION SW/4 SEC.16, T33S-R36W

FOOTAGES & 1250.0' F S L

RELATIONS 1250.0' F W L

ELEVATION 3046.94'

DISTANCE TO EXISTING WELL
2653.81' STEPHENS #1-16

AUTHORIZED BY D. SMITH

SW/4 SEC.16, T33S - R36W STEVENS COUNTY, KANSAS

CROP WINTER WHEAT

WATER WELL _____

NEAREST TOWER _____

AIRPORT _____

LATITUDE 37°10'24.60041" N

LONGITUDE 101°14'37.92664" W

STATE PLANE COORD.
KANSAS SOUTH ZONE
NAD 27

X= 1200605.80

Y= 196310.99

DRIVING DIRECTIONS USED TO STAKE
WELL FROM KNOWN LANDMARK OR CITY
FROM:

FROM INTERSECTION FAS #936 &
HWY #51, 7.0 MILES EAST OF
HUGOTON, KS. THENCE WEST 1.75
MILES. THENCE NORTH 1250.0 FT.
INTO.

THEODORE V. HARDER
LICENSED
2-26-2010
LS-1097

Theodore V. Harder

Theodore V. Harder, P.E. No: 1097

NOTE: CONTRACTOR TO CONTACT ONE CALL @ 1-800-DIG SAFE
PRIOR TO ANY EXCAVATION OR CONSTRUCTION.

<p>1106 SHERMAN AVE. PETROLEUM CORPORATION ELKHART, KANSAS 67950</p>		<table border="1"> <thead> <tr> <th>NO.</th> <th>DWN.</th> <th>REVISIONS</th> <th>DATE</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>		NO.	DWN.	REVISIONS	DATE													<p>AND ASSOCIATES "locating our world" LAND SURVEYING - GPS SPECIALISTS P.O. BOX 518 514 MORTON Elkhart, Kansas 67950 Phone: (620) 697-2696 Fax: (620) 697-4175 E-MAIL: tharder@elkhart.com</p>
NO.	DWN.	REVISIONS	DATE																	
<p>WELL LOCATION OF THE SHINE "B" #2H LOCATED IN THE SW/4 SEC.16, T33S-R36W, STEVENS COUNTY, KANSAS</p>		<p>SCALE: 1"=1500' DATE: 2/25/2010</p>																		
<p>DRAWN BY: SSA</p>	<p>CHECKED BY: TVH</p>	<p>APPROVED BY:</p>	<p>AUTHORIZED BY: D. SMITH</p>	<p>WORK ORDER NO.:</p>																

PLAT AND CERTIFICATION OF ACREAGE ATTRIBUTABLE TO A GAS WELL

Kansas Corporation Commission, Conservation Division
 Finney State Office Building, 130 South Market, Room 2078 Wichita, Kansas 67202

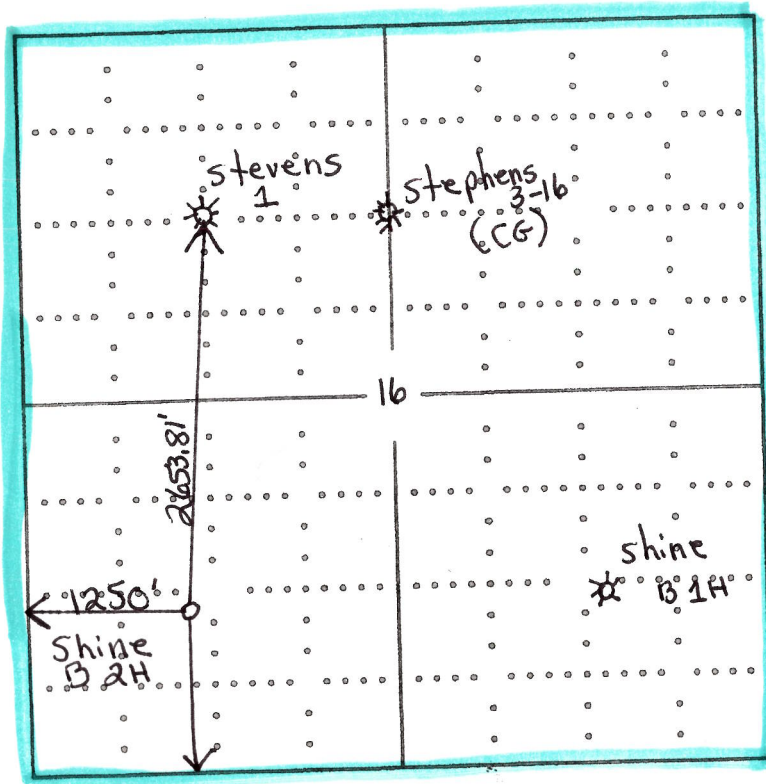
API NUMBER: _____
 OPERATOR: Anadarko Petroleum Corporation
 LEASE: Shine B
 WELL NUMBER: 2H
 FIELD: Hugoton
 NUMBER OF ACRES ATTRIBUTABLE TO WELL: 640
 QTR/QTR/QTR: NE - SW - SW
 (Show the location for the well and shade attributable acreage for prorated or spaced wells). (Show the footage to the nearest lease or unit boundary line; and show footage to the nearest common source supply well).

LOCATION OF WELL: COUNTY: Stevens
1250 feet from X South North line of section
1250 feet from East X West line of section

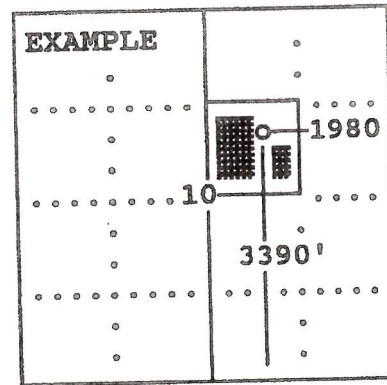
SECTION 16 TWP 33(S) RNG 36W
 IS SECTION X REGULAR or IRREGULAR
 IF SECTION IS IRREGULAR, LOCATE WELL FROM
 NEAREST CORNER BOUNDARY (check line below)
 Section corner used: NE NW SE SW

All Sec 16-T33S-R36W

Stevens County



Divergent
Interests



SEWARD CO.

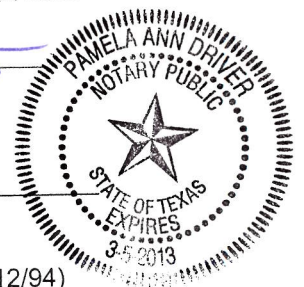
The undersigned hereby certifies as Staff Regulatory Analyst (title) for Anadarko Petroleum Corporation (Co.), a duly authorized agent, that all information shown hereon is true and correct to the best of my knowledge and belief, that all acreage claimed attributable to the well named herein is held by production from that well and hereby make application for an allowable to be assigned to the well upon the filing of this form and the State test, whichever is later.

Signature Pamela A Driver

Subscribed and sworn before me this 10th day of June, 2010

Pamela A Driver

Notary Public



My Commission expires 3/5/2013

EXXONMOBIL
COBB NO. 1 UNIT #2

EXXONMOBIL
BROWN K UNIT #4

MOBIL OIL CORP
CITIZEN STATE BANK #2

EXXONMOBIL
THOMAS T HOLT UNIT #1

EXXONMOBIL
COBB #1

EXXONMOBIL
K BROWN UNIT #3

EXXONMOBIL
BROWN #1

EXXONMOBIL
CITIZENS STATE BANK #1

EXXONMOBIL
COBB #1 UNIT #4

MOBIL OIL CORP
BROWN K UNIT #4

EXXONMOBIL
CITIZENS STATE BANK #2

HOLT THOMAS #3-10

EXXONMOBIL
HARRISON UNIT #3

EXXONMOBIL
HARRISON UNIT #2

ANADARKO ANADARKO
STEVENS #1 STEPHENS #3-16

EXXONMOBIL
MUELLER NO 1 UNIT #3

EXXONMOBIL
HARRISON #1

ANADARKO PET CORP
SHINE B. #1H
ANADARKO SHINE B. #1H
ANADARKO SHINE B. #1H

EXXONMOBIL
MUELLER #1

EXXONMOBIL
MUELLER #1 UNIT #5

EXXONMOBIL
MUELLER #1 UNIT #4

EL PASO E & P COMPANY L P
CARPENTER #8

NORTHERN PUMP COMPANY
CARPENTER #1

EXXONMOBIL
ALBRITTEN #1 FARM #2

20

EL PASO E & P COMPANY L P
CARPENTER #1-20
ALBRITTEN #1 UNIT #3

EXXONMOBIL
ALBRITTEN #1

EXXONMOBIL
FLOWERS #1
EOG RESOURCES INCORPORATED
JAMES #22-1H

22

MOBIL OIL CORP
FLOWER NO 1 UNIT #4

EXXONMOBIL
FLOWER NO 1 UNIT #3

EXXONMOBIL
GREGG #1 UNIT #2

EXXONMOBIL
CARPENDER #1



Shine B-2H

16-33S-36W

Stevens County, Kansas

POSTED WELL DATA

Operator

Well Label

WELL SYMBOLS

○ LOCATION



Gas Well



March 12, 2010