# 

Well will not be drilled or Permit Expired Date: \_

Signature of Operator or Agent:

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

## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form C-1 March 2010 Form must be Typed Form must be Signed All blanks must be Filled

### NOTICE OF INTENT TO DRILL

	month	day	year	Spot Description:	
		,	<b>,</b>	Sec Twp.	
PERATOR: License#				feet from	
ame:				feet from	E / W Line of Section
ddress 1:				Is SECTION: Regular Irregular?	
ddress 2:				(Note: Locate well on the Section I	Plat on reverse side)
ty:				County:	,
ntact Person:				Lease Name:	
none:				Field Name:	
ONTRACTOR: License#	ŧ			Is this a Prorated / Spaced Field?	Yes No
ame:				Target Formation(s):	
				Nearest Lease or unit boundary line (in footage)	
Well Drilled For:	Well Class:	Type E	Equipment:	Ground Surface Elevation:	
Oil Enh	=	=	lud Rotary	Water well within one-quarter mile:	Yes N
Gas Stora	• =		ir Rotary	Public water supply well within one mile:	Yes N
Dispo	$\vdash$	C	able	Depth to bottom of fresh water:	
Seismic ;#				Depth to bottom of fresh water:	
Other:					
If OWWO: old wel	I information as follow	ıs.		Surface Pipe by Alternate: II III	
				Length of Surface Pipe Planned to be set:	
Operator:				Length of Conductor Pipe (if any):	
Well Name:				Projected Total Depth:	
Original Completion D	ate: O	riginal Total D	epth:		
irestianal Davieted ev II.	٥ طال مین اصفور مانده		□ Vaa □ Na	Water Source for Drilling Operations:	
Directional, Deviated or Ho Yes, true vertical depth:			Yes No	Well Farm Pond Other:	
Rottom Hole Location:				DWR Permit #:	
CC DKT #:				(Note: Apply for Permit with	
				77 00100 00 (0.10.11)	Yes N
				If Yes, proposed zone:	
			AF	FIDAVIT	
he undersigned hereby	affirms that the drilli	ing, completi	on and eventual pl	ugging of this well will comply with K.S.A. 55 et. sec	٦.
-		_		ugging of this well will comply with K.S.A. 55 et. sec	٦.
t is agreed that the follow	wing minimum requi	rements will b	be met:	ugging of this well will comply with K.S.A. 55 et. sec	<del>]</del> .
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Location of Well: County:

For KCC Use ONLY	
API # 15	_

Operator

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

In all cases, please fully complete this side of the form. Include items 1 through 5 at the bottom of this page.

:						feet from N / S Line of S
						feet from E / W Line of S
						Twp S. R
						····p· 0· ···
		vell:			Is Section:	Regular or Irregular
TR/QTR/QTR	of acreage:	:				
					If Section is Irre	egular, locate well from nearest corner boundary
					Section corner u	sed: NE NW SE SW
				PL/	AT TA	
Sh	ow location	of the well. She	ow footage to th	e nearest lea	ase or unit boundary	y line. Show the predicted locations of
lease road	ds, tank bat	teries, pipelines	and electrical li	nes, as requi	ired by the Kansas	Surface Owner Notice Act (House Bill 2032).
			You may	attach a sep	arate plat if desired	l.
	:	:	:	•	:	
						LEGEND
		:	:	:	:	O Well Location
	:					Tank Battery Location
						Pipeline Location
	:	<u>;</u>		:	:	Electric Line Location
						Lease Road Location
	:	:	:	:	:	
	:			:		EXAMPLE : :
		:	- <del>- :</del>	<u> </u>	:	
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it. ———				:		SEWARD CO. 3390' FEL

#### In plotting the proposed for 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).
- 5. The predicted locations of lease roads, tank batteries, pipelines, and electrical lines.

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION 042921

Form CDP-1 May 2010 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)	Pit is:  Proposed Existing  If Existing, date constructed:  Pit capacity:  (bbls)		SecTwpR East WestFeet from North / South Line of SectionFeet from East / West Line of SectionCounty		
Is the pit located in a Sensitive Ground Water A	rea? Yes	No	Chloride concentration: mg/l (For Emergency Pits and Settling Pits only)		
Is the bottom below ground level?			How is the pit lined if a plastic liner is not used?		
Pit dimensions (all but working pits):	Length (fee	et)	Width (feet) N/A: Steel Pits		
If the pit is lined give a brief description of the li material, thickness and installation procedure.	om ground level to dee	Describe proce	dures for periodic maintenance and determining any special monitoring.		
Distance to nearest water well within one-mile of pit:		Depth to shallo Source of infor	west fresh water feet. mation:		
feet Depth of water wellfeet		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 s flow into the pit?  Yes No  Submitted Electronically		Type of materia  Number of work  Abandonment p  Drill pits must b	over and Haul-Off Pits ONLY:  all utilized in drilling/workover:  king pits to be utilized:  procedure:  de closed within 365 days of spud date.		
	KCC	OFFICE USE O	NLY		
Date Received: Permit Num	ber:		Liner Steel Pit RFAC RFAS  t Date: Lease Inspection: Yes No		

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form KSONA-1 July 2010 Form Must Be Typed Form must be Signed All blanks must be Filled

# **CERTIFICATION OF COMPLIANCE WITH THE** KANSAS SURFACE OWNER NOTIFICATION ACT

This form must be submitted with all Forms C-1 (Notice of Intent to Drill); CB-1 (Cathodic Protection Borehole Intent); T-1 (Request for Change of Operator Transfer of Injection or Surface Pit Permit); and CP-1 (Well Plugging Application). Any such form submitted without an accompanying Form KSONA-1 will be returned.

Select the corresponding form being filed: C-1 (Intent) CB-1 (CB-1)	Cathodic Protection Borehole Intent) T-1 (Transfer) CP-1 (Plugging Application)			
OPERATOR: License #	Well Location:			
Name:	SecTwpS. R East West			
Address 1:	County:			
Address 2:	Lease Name: Well #:			
City:	If filing a Form T-1 for multiple wells on a lease, enter the legal description o			
Contact Person:	the lease below:			
Phone: ( ) Fax: ( )				
Email Address:				
Surface Owner Information:				
Name:	When filing a Form T-1 involving multiple surface owners, attach an additional			
Address 1:	sheet listing all of the information to the left for each surface owner. Surface owner information can be found in the records of the register of deeds for the			
Address 2:	county, and in the real estate property tax records of the county treasurer.			
City:				
the KCC with a plat showing the predicted locations of lease roads, tank	dic Protection Borehole Intent), you must supply the surface owners and k batteries, pipelines, and electrical lines. The locations shown on the plat n the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.			
☐ I certify that, pursuant to the Kansas Surface Owner Notice A owner(s) of the land upon which the subject well is or will be to CP-1 that I am filing in connection with this form; 2) if the form to form; and 3) my operator name, address, phone number, fax, at ☐ I have not provided this information to the surface owner(s). I at KCC will be required to send this information to the surface owner(s).	cknowledge that, because I have not provided this information, the vner(s). To mitigate the additional cost of the KCC performing this			
task, I acknowledge that I am being charged a \$30.00 handling  If choosing the second option, submit payment of the \$30.00 handling form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-	fee with this form. If the fee is not received with this form, the KSONA-1			
Submitted Electronically				

# **Summary of Changes**

Lease Name and Number: Ray Schindler 6

API/Permit #: 15-163-23893-00-00

Doc ID: 1042921

Correction Number: 1

Approved By: Rick Hestermann 08/24/2010

Field Name	Previous Value	New Value
Contractor Name	Advise on ACO-1 Must be licensed by KCC	Advise on ACO-1 Must be licensed by KCC
KCC Only - Alternate Completion	II	I
KCC Only - Date Received	08/23/2010	09/01/2010
KCC Only - Lease Inspection	Yes	No
KCC Only - Surface Pipe	200	670
Length of Surface Pipe Planned to be set	240	1250
Save Link	//kcc/detail/operatorE ditDetail.cfm?docID=10	//kcc/detail/operatorE ditDetail.cfm?docID=10
Surface Pipe By Alternate I or II	42390 II	42921 I