

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**

| Expected Spud Date:  | Spot Description:  |
|--|--|
| monur day year   |  |
| PERATOR: License#  | feet from N / S Line of Section  |
| lame:  | feet from E / W Line of Section  |
| ddress 1:  | Is SECTION: Regular Irregular?   |
| ddress 2:  |  |
| State:   | County:  |
| Contact Person:  | Lease Name: Well #:  |
| hone:  | Field Name:  |
| ONTRACTOR: License#  | Is this a Prorated / Spaced Field?   |
| ame:   | Target Formation(s):   |
| Well Drilled For: Well Class: Type Equipment:  | Nearest Lease or unit boundary line (in footage):  |
|  | Ground Surface Elevation:feet MS   |
| Oil Enh Rec Infield Mud Rotary   | Water well within one-quarter mile:  |
| Gas Storage Pool Ext. Air Rotary   | Public water supply well within one mile:  |
| Disposal Wildcat Cable  Seismic ; # of Holes Other   | Depth to bottom of fresh water:  |
| Other:   | Depth to bottom of usable water:   |
|  | Surface Pipe by Alternate: I   |
| If OWWO: old well information as follows:  | Length of Surface Pipe Planned to be set:  |
| Operator:  |  |
| Well Name:   | Projected Total Depth:   |
| Original Completion Date: Original Total Depth:  |  |
| - · · g······ - · · · · · · · · · · · ·  | Water Source for Drilling Operations:  |
| Directional, Deviated or Horizontal wellbore?  | Well Farm Pond Other:  |
| f Yes, true vertical depth:  | DWR Permit #:  |
| Bottom Hole Location:  | ( <b>Note:</b> Apply for Permit with DWR )   |
|  |  |
| CCC DKT #:   |  |
| CCC DKT #:   |  |
|  | Will Cores be taken? Yes N If Yes, proposed zone:  |
| AF   | Will Cores be taken?  If Yes, proposed zone:  FIDAVIT  |
| AF The undersigned hereby affirms that the drilling, completion and eventual p   | Will Cores be taken?  If Yes, proposed zone:  FIDAVIT  |
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Side Two



| For KCC Use ONLY |  |
|------------------|--|
| API # 15         |  |

#### 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.

| 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   |  |  |
| Number of Acres attributable to well:                     |  |  |  |
| QTR/QTR/QTR of acreage:                                   | Is Section: Regular or Irregular                                   |  |  |
|   | If Section is Irregular, locate well from nearest corner boundary. |  |  |
|   | Section corner used: NE NW SE SW                                   |  |  |
|   | occion comerciaca.   |  |  |
|   |  |  |  |
| PL  | AT   |  |  |
| Show location of the well. Show footage to the nearest le | ase or unit boundary line. Show the predicted locations of         |  |  |
|   | uired by the Kansas Surface Owner Notice Act (House Bill 2032).    |  |  |
| You may attach a sej<br>1900                              | parate plat if desired.<br>ft                                      |  |  |
| 1900  | Tt.  |  |  |
|   |  |  |  |
|   | LEGEND   |  |  |
|   | O Well Location  |  |  |
|   | Tank Battery Location  |  |  |
|   | Pipeline Location  |  |  |
|   | · · · · · · · · · · · · · · · · · · ·                              |  |  |
|   | Electric Line Location   |  |  |
|   | Lease Road Location  |  |  |
|   | :  |  |  |
|   | TVANDE :   |  |  |
|   | EXAMPLE  |  |  |
| 21  |  |  |  |
| 21  |  |  |  |
|   |  |  |  |
|   |  |  |  |
|   |  |  |  |
|   | 1980' FSL  |  |  |
|   |  |  |  |
|   |  |  |  |
|   |  |  |  |
|   |  |  |  |
|   | SEWARD CO. 3390' FEL   |  |  |

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).
- 5. The predicted locations of lease roads, tank batteries, pipelines, and electrical lines.



## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1049662

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   | Pit is:                 |  | SecTwp R  |  |
| Settling Pit Drilling Pit  |                         |  | Feet from North / South Line of Section   |  |
| Workover Pit Haul-Off Pit (If WP Supply API No. or Year Drilled)   | Pit capacity:(bbls)     |  | Feet from East / West Line of Section County                                    |  |
| Is the pit located in a Sensitive Ground Water A   | rea? Yes N              | No   | Chloride concentration: mg/l (For Emergency Pits and Settling Pits only)        |  |
| Is the bottom below ground level?  Yes No Artificial Liner?  Yes No                                      |                         | 0  | How is the pit lined if a plastic liner is not used?                            |  |
| Pit dimensions (all but working pits):   | Length (fee             | t)   | Width (feet) N/A: Steel Pits  |  |
| Depth fro  | om ground level to deep | pest point:  | (feet) No Pit   |  |
| If the pit is lined give a brief description of the line material, thickness and installation procedure. | ilei                    |  | dures for periodic maintenance and determining ncluding any special monitoring. |  |
| Distance to nearest water well within one-mile of pit:   |                         | Depth to shallowest fresh water feet. Source of information: |   |  |
| feet Depth of water wellfeet   |                         | measured   | well owner electric log KDWR  |  |
| Emergency, Settling and Burn Pits ONLY:  |                         | Drilling, Worko  | over and Haul-Off Pits ONLY:  |  |
| Producing Formation:   |                         | Type of material utilized in drilling/workover:              |   |  |
| Number of producing wells on lease:  |                         | Number of working pits to be utilized:                       |   |  |
| Barrels of fluid produced daily:   |                         | Abandonment p  | procedure:  |  |
| Does the slope from the tank battery allow all spilled fluids to flow into the pit?                      |                         | Drill pits must be closed within 365 days of spud date.      |   |  |
| Submitted Electronically   |                         |  |   |  |
|  | кссс                    | OFFICE USE OI  | NLY  Liner Steel Pit RFAC RFAS  |  |
| Date Received: Permit Numb   | ber:                    | Permi  | t Date: Lease Inspection: Yes No  |  |



### Kansas Corporation Commission Oil & Gas Conservation Division

1049662

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   |  |  |
| Address 1:  | County:   |  |  |
| Address 2:  | Lease Name: Well #:   |  |  |
| City: State: Zip:+  | If filing a Form T-1 for multiple wells on a lease, enter the legal description of  |  |  |
| 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  |   |  |  |

