

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

SGA?

### 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:
month day year	
ODERATOR, Licensett	(0/0/0/0) feet from N / S Line of Section
OPERATOR: License# Name:	feet from E / W Line of Section
Address 1:	Is SECTION: Regular Irregular?
Address 2:	
City: State: Zip: +	(Note: Locate well on the Section Plat on reverse side)
Contact Person:	County:
Phone:	Lease Name: Well #:
CONTRACTOR: Linear II	Field Name:
CONTRACTOR: License#	Is this a Prorated / Spaced Field?
Name:	Target Formation(s):
Well Drilled For: Well Class: Type Equipment:	Nearest Lease or unit boundary line (in footage):
Oil Enh Rec Infield Mud Rotary	Ground Surface Elevation:feet MSI
Gas Storage Pool Ext. Air Rotary	Water well within one-quarter mile:
Disposal Wildcat Cable	Public water supply well within one mile:  Yes  No
Seismic ; # of Holes Other	Depth to bottom of fresh water:
Other:	Depth to bottom of usable water:
	Surface Pipe by Alternate: I III
If OWWO: old well information as follows:	Length of Surface Pipe Planned to be set:
Operator:	Length of Conductor Pipe (if any):
Well Name:	Projected Total Depth:
Original Completion Date: Original Total Depth:	Formation at Total Depth:
	Water Source for Drilling Operations:
Directional, Deviated or Horizontal wellbore? Yes No	Well Farm Pond Other:
If Yes, true vertical depth:	DWR Permit #:
Bottom Hole Location:	(Note: Apply for Permit with DWR )
KCC DKT #:	Will Cores be taken? Yes No
	If Yes, proposed zone:
ΔΕΕ	IDAVIT
The undersigned hereby affirms that the drilling, completion and eventual plu	
The anacioighed hereby animing that the arining, completion and eventual pla	gging of this well will comply with recent to our seq.
It is agreed that the following minimum requirements will be mot:	
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Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

Spud date: \_

please check the box below and return to the address below.

Well will not be drilled or Permit Expired	Date:	 _
Signature of Operator or Agent:		



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.

Location of Well: County:

Legern	орстатот.								oation of tr	on. Oounty				
Number of Acres attributable to well:   Sec.	Lease:										feet from	N /	S Line	of Section
Number of Acres attributable to well:	Well Num	ber:						_			feet from	E /	W Line	of Section
Number of Acres attributable to well:	Field:							Se	eC.	Twp.	 S. R.		F	W
Section is Irregular, locate well from nearest corner boundary.   Section corner used: NE NW SE SW	1 101d.							_		p				
If Section is Irregular, locate well from nearest corner boundary.  Section corner used: NE NW SE SW  PLAT  Show location of the well. Show footage to the nearest lease or unit boundary line. Show the predicted locations of lease roads, tank batteries, pipelines and electrical lines, as required by the Kansas Surface Owner Notice Act (House Bill 2032).  You may attach a separate plat if desired.  LEGEND  Well Location  Tank Battery Location  Pipeline Location  Pipeline Location  Electric Line Location  Lease Road Location	Number o	f Acres attrib	outable to	well:				– le	Section:	Regular o	r Irredi	ılar		
## Section is Irregular, locate well from nearest corner boundary.    Section corner used:   NE   NW   SE   SW	QTR/QTR	/QTR/QTR	of acreag	e:		-	-	13	Occilon.	Tregular o		uiai		
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## 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

1057865

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)  Is the pit located in a Sensitive Ground Water A	Pit is:  Proposed Existing  If Existing, date constructed:  Pit capacity:  (bbls)  Area? Yes No		SecTwpRBastWest West East West Feet from North / South Line of Section Feet from East / West Line of Section County County Moreover Chloride concentration: mg/l mg/l (For Emergency Pits and Settling Pits only)				
Is the bottom below ground level?	Artificial Liner?  Yes  N	10	How is the pit lined if a plastic liner is not used?				
	Length (fee		Width (feet)				
If the pit is lined give a brief description of the li material, thickness and installation procedure.	ilei		dures for periodic maintenance and determining icluding any special monitoring.				
Distance to nearest water well within one-mile of	of pit:	Depth to shallo Source of inforr	west fresh water feet. nation:				
feet Depth of water well	feet	measured	well owner electric log KDWR				
Emergency, Settling and Burn Pits ONLY:		Drilling, Work	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 s flow into the pit? Yes No	pilled fluids to	·	e closed within 365 days of spud date.				
Submitted Electronically							
	KCC OFFICE USE ONLY  Liner Steel Pit RFAC RFAS						
Date Received: Permit Num	ber:	Permi	t Date: Lease Inspection: Yes No				



#### Kansas Corporation Commission Oil & Gas Conservation Division

1057865

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	(Cathodic Protection Borehole Intent) T-1 (Transfer) CP-1 (Plugging Application)						
OPERATOR: License #	Well Location:						
	County:						
Address 1:	Lease Name: Well #:						
Address 2: State: Zip:+							
Contact Person:	If filing a Form T-1 for multiple wells on a lease, enter the legal description o the lease below:						
Phone: ( ) Fax: ( )							
Email Address:							
Surface Owner Information:							
Name:	When filing a Form T-1 involving multiple surface owners, attach an additional 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 county, and in the real estate property tax records of the county treasurer.						
Address 1:							
Address 2:							
City:							
the KCC with a plat showing the predicted locations of lease roads, tan are preliminary non-binding estimates. The locations may be entered of Select one of the following:  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 I CP-1 that I am filing in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax, a I have not provided this information to the surface owner(s). I a KCC will be required to send this information to the surface or	Act (House Bill 2032), I have provided the following to the surface ocated: 1) a copy of the Form C-1, Form CB-1, Form CB-1, Form CB-1, Form T-1, or Form being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address.  acknowledge that, because I have not provided this information, the wner(s). To mitigate the additional cost of the KCC performing this gree, payable to the KCC, which is enclosed with this form.						
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 will be returned.						
Submitted Electronically							
[	_						







Well Proposal



4" NG/3" WA Proposed Pipes



Anticipated Road Ingress & Egress



Conservation Division Finney State Office Building 130 S. Market, Rm. 2078 Wichita, KS 67202-3802



Phone: 316-337-6200 Fax: 316-337-6211 http://kcc.ks.gov/

Sam Brownback, Governor

Mark Sievers, Chairman Ward Loyd, Commissioner Thomas E. Wright, Commissioner

June 16, 2011

LANCE GALVIN
PostRock Midcontinent Production LLC
Oklahoma Tower
210 Park Ave, Ste 2750
OKLAHOMA CITY, OK 73102

Re: Drilling Pit Application ROBINSON, WALTER F 12-2 NW/4 Sec.12-30S-18E Neosho County, Kansas

#### Dear LANCE GALVIN:

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 as soon as practical after drilling operations have ceased.

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) 432-2300 when the fluids have been removed. Please file form CDP-5 (August 2008), Exploration and Production Waste Transfer, through KOLAR 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) 432-2300.