

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           OPERATOR: License#	feet from E / W Line of Section Is SECTION: Regular Irregular?  (Note: Locate well on the Section Plat on reverse side) County:
Name:	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:
Name:	feet from E / W Line of Section Is SECTION: Regular Irregular?  (Note: Locate well on the Section Plat on reverse side) County:
Address 2: State: Zip: +	(Note: Locate well on the Section Plat on reverse side)  County:
Address 2: State: Zip: +	County:
State: Zip: +	County:
Phone:	, -
	Lease Name: Well #:
DON'T DA OTO D. L	Field Name:
CONTRACTOR: License#	
Vame:	Target Formation(s):
	Nearest Lease or unit boundary line (in footage):
Well Drilled For: Well Class: Type Equipment:	Ground Surface Elevation:feet MS
Oil Enh Rec Infield Mud Rotary	Water well within one-quarter mile:
Gas Storage Pool Ext. Air Rotary	
Disposal Wildcat Cable	,
Seismic ;# of Holes Other	Depth to bottom of fresh water:
Other:	Depth to bottom of usable water:
If OWWO: old well information as follows:	Surface Pipe by Alternate: II III
	Length of Surface Pipe Planned to be set:
Operator:	
Well Name:	Projected Total Depth:
Original Completion Date: Original Total Depth:	
Directional, Deviated or Horizontal wellbore?	Water Source for Drilling Operations:
Directional, Deviated or Horizontal wellbore? Yes No  f Yes, true vertical depth:	ven l'anni ond l'outer.
Bottom Hole Location:	DWR Permit #:
KCC DKT #:	— (Note: Apply for Permit with DWR ☐ )
	VVIII GOTGS DE LAKOT.
	If Yes, proposed zone:
Al	FFIDAVIT
The undersigned hereby affirms that the drilling, completion and eventual p	olugging of this well will comply with K.S.A. 55 et. seq.
t is agreed that the following minimum requirements will be met:	
Notify the appropriate district office <i>prior</i> to spudding of well;	
2. A copy of the approved notice of intent to drill <b>shall be</b> posted on ea	ch drilling ria:
., .,	et 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	
, , ,	istrict office on plug length and placement is necessary prior to plugging;
5. The appropriate district office will be notified before well is either plu	,
	ted from below any usable water to surface within 120 DAYS of spud date. #133,891-C, which applies to the KCC District 3 area, alternate II cementing
	be plugged. <i>In all cases, NOTIFY district office</i> prior to any cementing.
1	3
ubmitted Electronically	
abilitiod Electromodily	7. Domonthou to
	Remember to:
For KCC Use ONLY	- File Certification of Compliance with the Kansas Surface Owner Notification
	·
API # 15	Act (KSONA-1) with Intent to Drill;
	Act (KSONA-1) with Intent to Drill; - File Drill Pit Application (form CDP-1) with Intent to Drill;
API # 15	Act (KSONA-1) with Intent to Drill; - File Drill Pit Application (form CDP-1) with Intent to Drill; - File Completion Form ACO-1 within 120 days of spud date;
API # 15 feet  Conductor pipe required feet  Minimum surface pipe required feet per ALT I II	Act (KSONA-1) with Intent to Drill; - File Drill Pit Application (form CDP-1) with Intent to Drill;
API # 15	Act (KSONA-1) with Intent to Drill; - 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;
API # 15 feet  Conductor pipe required feet per ALT I II	Act (KSONA-1) with Intent to Drill;  - 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;

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

Spud date: \_



feet from N / S Line of Section

feet from E / W Line of Section

For KCC Use ONLY	
API # 15	

Well Number:

Operator: \_\_

Lease: \_\_\_

### 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: \_\_\_

Field:							Se	ec	Twp	S. R		_ E	W
Number of Acr QTR/QTR/QTF							- Is	Section:	Regular or	Irregular			
								Section is ection corne	Irregular, locate er used: NE			rner boun SW	dary.
	Sh	ow locatio	n of the w	ell. Show i	footage to		PLAT	r unit bound	dary line. Show t	he predicted lo	cations o	of	
lea					d electrica	l lines, as i	required l		sas Surface Own				
	:		:	: : : :		:		:		LEGE	ND		
								: :			ocation attery L e Locati		
		•••••						:		Electric	c Line Locali C Line Local Road Lo	ocation	
									EXAN	IPLE :		:	]
	:		:	2	3							: 	
	······· · · · · · · · · · · · · · · ·							:				:	
1035 ft.—	:::::::	 —•	•				••••••	·		97		:	1980' FSL

NOTE: In all cases locate the spot of the proposed drilling locaton.

#### 1125 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).
- 5. The predicted locations of lease roads, tank batteries, pipelines, and electrical lines.



## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

071270

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	Emergency Pit Burn Pit Proposed Existin  Settling Pit If Existing, date constructed:  Workover Pit Haul-Off Pit Pit Psupply API No. or Year Drilled)  Pit capacity:		SecTwpR East West West Feet from North / South Line of Section Feet from East / West Line of Section County Chloride concentration: mg/l mg/l mg/l mg/l mg/l for Emergency Pits and Settling Pits only)			
Is the bottom below ground level?	Artificial Liner?  Yes  N	No	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 any special monitoring.			
Distance to nearest water well within one-mile of	of pit:	Depth to shallowest fresh water feet. Source of information:				
feet Depth of water well	feet	measured	well owner electric log KDWR			
Emergency, Settling and Burn Pits ONLY:		Drilling, Workover 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	procedure:			
Does the slope from the tank battery allow all s flow into the pit? Yes No	pilled fluids to	Drill pits must be closed within 365 days of spud date.				
Submitted Electronically						
KCC OFFICE USE ONLY  Liner Steel Pit RFAC RFAS						
Date Received: Permit Num	ber:	Permi	it Date: Lease Inspection: Yes No			



## Kansas Corporation Commission Oil & Gas Conservation Division

1071270

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 o the lease below:				
Contact Person:					
Phone: ( ) Fax: ( )					
Email Address:					
Surface Owner Information:					
Name:					
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 in 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					

For KCC Use ONLY		7 N
API # 15		·

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

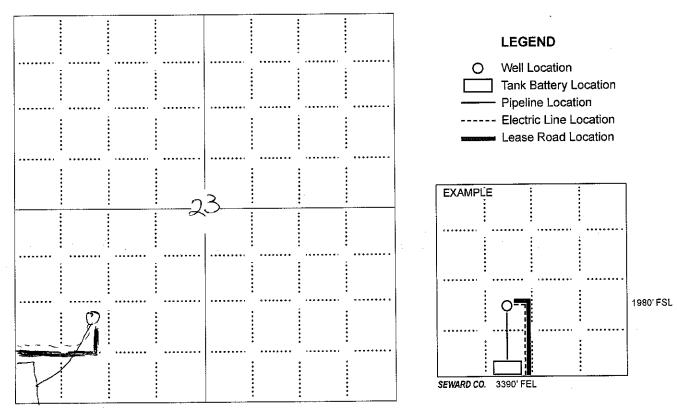
In all cases, please fully complete this side of the form. Include items 1 through 5 at the bottom of this page.

Operator: Downing Nelson Oil Company, Inc	Location of Well: County:	Graham
Lease: Nickelson Farms "B"	1,125	feet from N / S Line of Section
Well Number: 1-23	10,135	feet from E / X W Line of Section
Field: Wildcat	Sec. 23 Twp. 9	S. R. <sup>24</sup> E 🔀 W
Number of Acres attributable to well: 40  QTR/QTR/QTR/QTR of acreage: NE _ NE _ SW _ SW _ SW _ NE _ NE _ SW _ S	Is Section: Regular	or Irregular
		ate well from nearest corner boundary.  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.



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.
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