# 

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

OPERATOR: License#	paced Field?  Yes No  it boundary line (in footage):  vation:  pequarter mile:  well within one mile:  Yes No  Yes No  Yes No  Yes No
DERRATOR: License#   Lame:	feet from E / W Line of Section egular Irregular?  : Locate well on the Section Plat on reverse side)  Well #:
didress 1: didress 2: ity: State: Zip: + County: Lease Name: Field Name: Is this a Prorated / S Target Formation(s): Nearest Lease or ur Ground Surface Elev Water well within on or Public water supply Depth to bottom of to Surface Pipe by Alte Length of Sourace Original Completion Date: Original Total Depth: Projected Total Depth: Ottom Hole Location: CC DKT #: Will Cores be taken' If Yes, proposed zon AFFIDAVIT    Is SECTION: R (Note (Note County: (Note County: Lease Name: Field Name: Field Name: Storage Pool Ext. Air Rotary Public water supply Water well within on Public water supply Depth to bottom of to Surface Pipe by Alte Length of Surface Pipe by Alte Length of Surface Pipe by Alte Length of Conductor Projected Total Depth Formation at Total Depth (Surface Pipe Water Source for Droginal Completion Date: Original Total Depth: Promation at Total Depth (Surface Pipe Water Source for Droginal County Pipe Water Source File Water Source File Water Source File Wat	egular
ddress 2: ity: State: Zip: + County: Lease Name: Field Name: State Name: Field Name: Is this a Prorated / Stare Name: State Name: Nearest Lease Name: State Name: State Name: Nearest Lease or ure Name: State Name: Nearest Lease or ure Name: Storage Pool Ext. Air Rotary Nater well within on Public water supply Depth to bottom of the Other: Seismic; # of Holes Other Operator: Nearest Name: Nearest Lease or ure Ground Surface Elevent Nater well within on Public water supply Depth to bottom of the Name: Nearest Name: Nearest Lease or ure Ground Surface Elevent Nater well within on Public water supply Depth to bottom of the Name: Nearest Name: Nearest Lease or ure Name: Nearest Lease or ure Ground Surface Elevent Name: Nearest Lease or ure Surface Plevent Name: Near	: Locate well on the Section Plat on reverse side)  Well #:  paced Field?  It boundary line (in footage):  ration:feet MSI e-quarter mile:YesNewell within one mile:YesNewell within one mile:YesNewell water:
ty:	paced Field?
Lease Name:  DNTRACTOR: License#  Star Provided / Star Provide	paced Field?  paced Field?  it boundary line (in footage):  vation:  pe-quarter mile:  well within one mile:  resh water:
Lease Name:	paced Field?
DNTRACTOR: License#	paced Field?  Yes No  No  it boundary line (in footage):  vation:  e-quarter mile:  well within one mile:  Yes No  Yes
Well Drilled For: Well Class: Type Equipment:  Oil Enh Rec Infield Mud Rotary Gas Storage Pool Ext. Air Rotary Disposal Wildcat Cable  Other: # of Holes Other  Operator: Well Name: Original Completion Date: Original Total Depth: Formation at Total Depth: Ottom Hole Location: CC DKT #:  Will Cores be taken' If Yes, proposed zon AFFIDAVIT  ne undersigned hereby affirms that the drilling, completion and eventual plugging of this well will co is agreed that the following minimum requirements will be met:  Target Formation(s): Nearest Lease or ur Ground Surface Elev Water well within on Public water supply Depth to bottom of the Surface Public water supply Depth to	it boundary line (in footage):
Well Drilled For:  Well Class: Type Equipment:  Nearest Lease or ur Ground Surface Elev Water well within on Public water supply Depth to bottom of to Surface Pipe by Alte Length of Conductor Well Name: Original Completion Date: Original Completion: CC DKT #:  Well Drilled For: Well Class: Type Equipment: Nearest Lease or ur Ground Surface Elev Water well within on Public water supply Depth to bottom of to Surface Pipe by Alte Length of Surface P Length of Conductor Projected Total Depth Formation at Total Depth Water Source for Dr Well Far DWR Permit #: Will Cores be taken' If Yes, proposed zon  AFFIDAVIT  he undersigned hereby affirms that the drilling, completion and eventual plugging of this well will co is agreed that the following minimum requirements will be met:  1. Notify the appropriate district office prior to spudding of well;	it boundary line (in footage):feet MS vation:feet MS ve-quarter mile:YesN vell within one mile:YesN
Oil Enh Rec Infield Mud Rotary Gas Storage Pool Ext. Air Rotary Disposal Wildcat Cable  Other: Depth to bottom of f.  Other: Depth to bottom of f.  Surface Pipe by Alte Length of Surface P Coriginal Completion Date: Original Total Depth: Formation at Total Depth Ottom Hole Location: CC DKT #: Will Cores be taken?  If our being a firms that the drilling, completion and eventual plugging of this well will cois agreed that the following minimum requirements will be met:  Original of Nume Infield Mud Rotary Water Rotary Water well within on Public water supply Depth to bottom of f. Surface Pipe by Alte Length of Conductor Projected Total Depth Formation at Total Depth Water Source for Dr Water Source for Dr Well Far DWR Permit #: Will Cores be taken? If Yes, proposed zon  AFFIDAVIT  The undersigned hereby affirms that the drilling, completion and eventual plugging of this well will cois agreed that the following minimum requirements will be met:  Notify the appropriate district office prior to spudding of well;	vation:feet MS e-quarter mile:YesN well within one mile:YesN resh water:
Oil Enh Rec Infield Mud Rotary Gas Storage Pool Ext. Air Rotary Disposal Wildcat Cable Depth to bottom of for Depth to bottom of for Surface Pipe by Alter Conductor Projected Total Depth Original Completion Date: Original Total Depth: Original Completion Date: Original Total Depth: Office Projected Total Depth: Original Completion Date: Original Completion Date: Original Total Depth: Original Completion Date: Original Total Depth: Original Completion Air Total Depth: Original Completion Date: Original Total Depth: Original Total Depth: Original Total Depth: Original Total Depth: Original Completion Air Total Depth: Original Completion Date: Original Total Depth: Original Completion Air Total Depth: Original Completion Date: Original Completion Date: Original Total Depth: Original Completion Air Total Depth: Original Completion Date: Original Completion Date: Original Total Depth: Original Completion Date: Original Total Depth: Original Completion Date: Ori	e-quarter mile:  Well within one mile:  Yes N  Yes N  Yes N
Gas Storage Pool Ext. Air Rotary Disposal Wildcat Cable Depth to bottom of for Surface Pipe by Alter If OWWO: old well information as follows:  Operator: Well Name: Original Completion Date: Original Completion Date: Other: Other: Original Completion Date: Original Total Depth: Other: Original Completion Date: Original Completion Date: Original Completion Date: Original Total Depth: Other: Original Completion Date: Original Total Depth: Other: Original Completion Date: Original Total Depth: Other: Original Total Depth: Other Surface P  Length of Conductor Original Total Depth: Other: Original Total Depth: Original To	well within one mile: Yes Neesh water:
Disposal Wildcat Cable Public water supply Depth to bottom of from the Dottom of the Depth to bottom of the Depth to bottom of the Surface Pipe by Alter Length of Surface Pipe by Alter Length of Surface Pipe by Alter Sur	esh water:
Other:	
Surface Pipe by Alte Length of Surface P Length of Conductor Projected Total Depth Formation at Total D Water Source for Dr Well Name: Ves, true vertical depth: Ves, true vertical depth: Ves, true vertical depth: Ves No Ves, true vertical depth: Ves No Ves Well Far DWR Permit #: Vill Cores be taken' If Yes, proposed zon  AFFIDAVIT  he undersigned hereby affirms that the drilling, completion and eventual plugging of this well will co is agreed that the following minimum requirements will be met:  1. Notify the appropriate district office <i>prior</i> to spudding of well;	
If OWWO: old well information as follows:  Operator:	sable water:
Operator:	
Well Name: Original Total Depth: Formation at Total Depth irectional, Deviated or Horizontal wellbore? Yes, true vertical depth: Ottom Hole Location: ORD Horizontal wellbore?  CC DKT #: Will Cores be taken' If Yes, proposed zon  AFFIDAVIT  he undersigned hereby affirms that the drilling, completion and eventual plugging of this well will consist agreed that the following minimum requirements will be met:  1. Notify the appropriate district office prior to spudding of well;	pe Planned to be set:
Original Completion Date: Original Total Depth: Formation at Total D  Water Source for Dr  Well Far  DWR Permit #:  DWR Permit #:  Will Cores be taken'  If Yes, proposed zon  AFFIDAVIT  he undersigned hereby affirms that the drilling, completion and eventual plugging of this well will co  is agreed that the following minimum requirements will be met:  1. Notify the appropriate district office <i>prior</i> to spudding of well;	Pipe (if any):
Water Source for Dr Well Far DWR Permit #:  Will Cores be taken? If Yes, proposed zon  AFFIDAVIT  The undersigned hereby affirms that the drilling, completion and eventual plugging of this well will consist agreed that the following minimum requirements will be met:  1. Notify the appropriate district office <i>prior</i> to spudding of well;	h:
irectional, Deviated or Horizontal wellbore?  Yes, true vertical depth:  Ottom Hole Location:  CC DKT #:  Will Cores be taken'  If Yes, proposed zon  AFFIDAVIT  he undersigned hereby affirms that the drilling, completion and eventual plugging of this well will co is agreed that the following minimum requirements will be met:  1. Notify the appropriate district office <i>prior</i> to spudding of well;	epth:
Will Cores be taken' If Yes, proposed zon  AFFIDAVIT  The undersigned hereby affirms that the drilling, completion and eventual plugging of this well will consist agreed that the following minimum requirements will be met:  1. Notify the appropriate district office <i>prior</i> to spudding of well;	
Sottom Hole Location:  CCC DKT #:  Will Cores be taken'  If Yes, proposed zon  AFFIDAVIT  The undersigned hereby affirms that the drilling, completion and eventual plugging of this well will contain the sagreed that the following minimum requirements will be met:  1. Notify the appropriate district office <i>prior</i> to spudding of well;	m Pond Other:
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If Yes, proposed zon  AFFIDAVIT  The undersigned hereby affirms that the drilling, completion and eventual plugging of this well will contain the agreed that the following minimum requirements will be met:  1. Notify the appropriate district office <i>prior</i> to spudding of well;	
AFFIDAVIT  he undersigned hereby affirms that the drilling, completion and eventual plugging of this well will co is agreed that the following minimum requirements will be met:  1. Notify the appropriate district office <i>prior</i> to spudding of well;	e:
	mply with K.S.A. 55 et. seq.
<ol> <li>A copy of the approved notice of intent to drill <i>shall be</i> posted on each drilling rig;</li> <li>The minimum amount of surface pipe as specified below <i>shall be set</i> by circulating cement to through all unconsolidated materials plus a minimum of 20 feet into the underlying formation.</li> <li>If the well is dry hole, an agreement between the operator and the district office on plug length</li> <li>The appropriate district office will be notified before well is either plugged or production casing</li> <li>If an ALTERNATE II COMPLETION, production pipe shall be cemented from below any usable Or pursuant to Appendix "B" - Eastern Kansas surface casing order #133,891-C, which applies must be completed within 30 days of the spud date or the well shall be plugged. <i>In all cases,</i></li> </ol>	and placement is necessary <i>prior to plugging;</i> is cemented in; water to surface within <i>120 DAYS</i> of spud date. to the KCC District 3 area, alternate II cementing
API # 15 Act (KSONA-1) with I  Conductor pipe required feet	on (form CDP-1) with Intent to Drill; ACO-1 within 120 days of spud date;
	on plat according to field proration orders;
7	trict office 48 hours prior to workover or re-entry;
This authorization expires:	rt (CP-4) after plugging is completed (within 60 days); al before disposing or injecting salt water.
(This authorization void if drilling not started within 12 months of approval date.)	ed or permit has expired (See: authorized expiration date)
Sould date: Agent: please check the box	

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:							_ Lo	cation of \	Well: Cou	nty:				
Lease:										fe	et from	N /	S Line	of Section
Well Numb	er:									fe	et from	E /	W Line	of Section
Field:				_ Se	ec	Twp.	;	S. R		E	W			
Number of Acres attributable to well:				15	Is Section: Regular or Irregular									
								Section is ection corn	_	r, locate we	NW		orner boun SW	dary.
				ipelines an	d electrica	l lines, as		y the Kan	sas Surfa	Show the p ce Owner N				
2323 ft		:	:	0		:	:	:			LEG	END		
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								:	-		0=			1980' FSL
		:	•	: : :		: : : :		: : :		SEWARD CO.	3390' FE	<b>!</b> :L	:	

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 078120

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  Workover Pit  Haul-Off Pit	Pit is:  Proposed  If Existing, date co	Existing	SecTwp R East		
(If WP Supply API No. or Year Drilled)	Pit capacity:	(bbls)			
Is the pit located in a Sensitive Ground Water A	Area? Yes	No	Chloride concentration: mg/l (For Emergency Pits and Settling Pits only)		
Is the bottom below ground level?	Artificial Liner?	No	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		
Depth fro	om ground level to dee	epest point:	(feet) No Pit		
If the pit is lined give a brief description of the li material, thickness and installation procedure.			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 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 procedure:			
Does the slope from the tank battery allow all s flow into the pit? Yes No	spilled fluids to	Drill pits must be closed within 365 days of spud date.			
Submitted Electronically					
	KCC	OFFICE USE O			
Date Received: Permit Num	ber:	Permi	Liner Steel Pit RFAC RFAS it Date: Lease Inspection: Yes No		

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

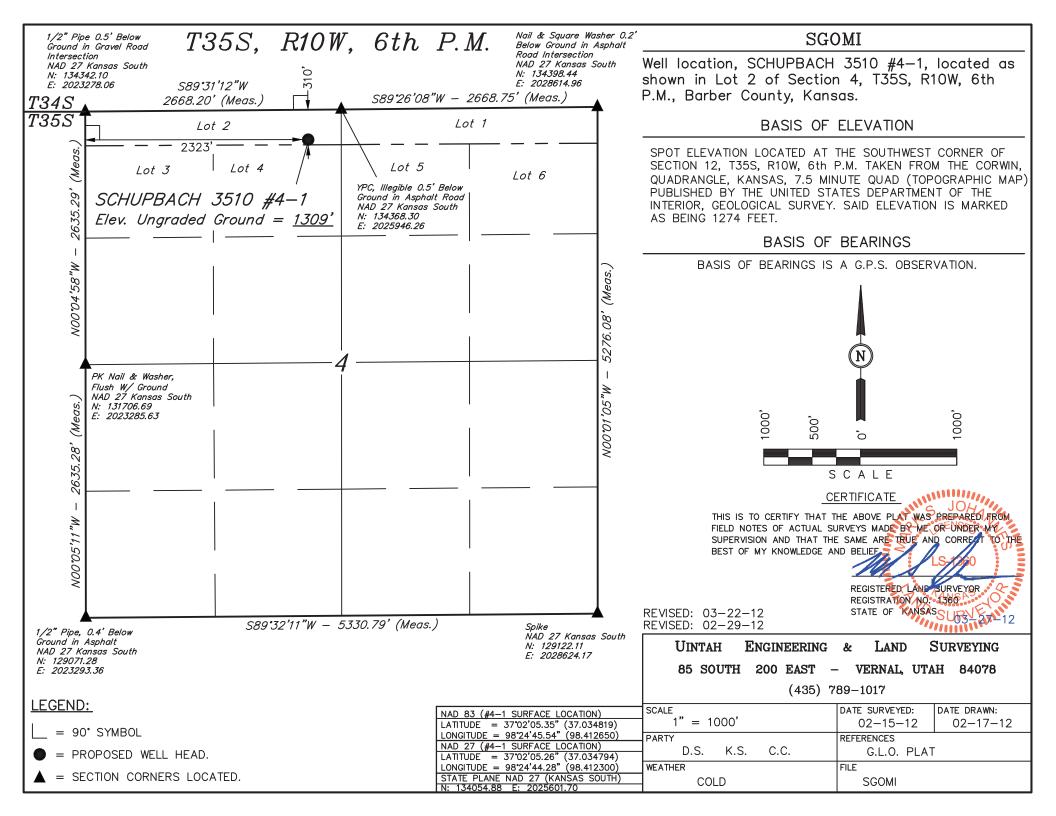
Form KSONA-1 July 2010 Form Must Be Typed Form must be Signed

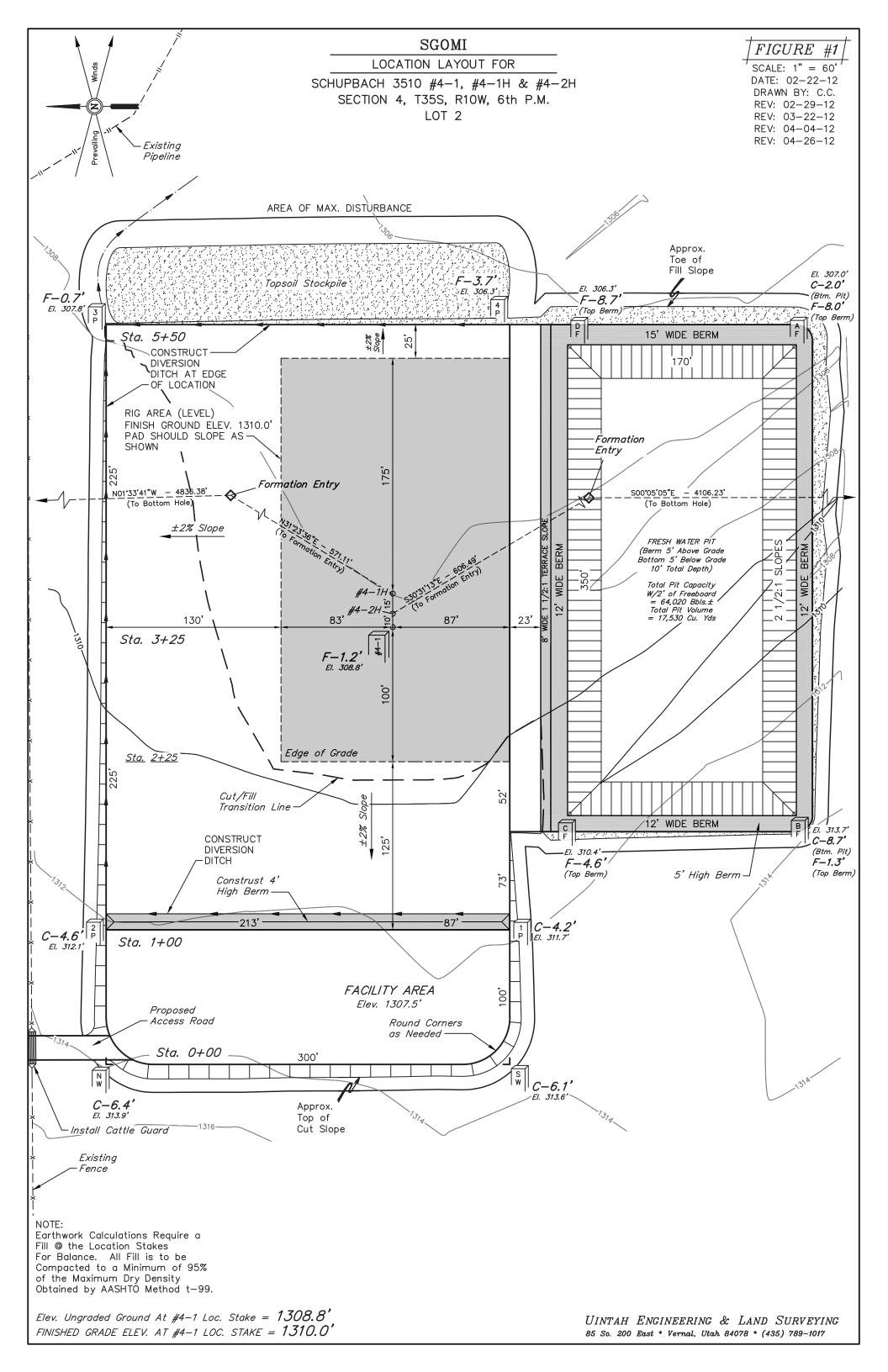
All blanks must be Filled

#### **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 (C	Cathodic Protection Borehole Intent) T-1 (Transfer) CP-1 (Plugging Application)					
OPERATOR: License #	Well Location:					
Name:	Sec TwpS. R 🗌 East 🗌 West					
Address 1:	County:					
Address 2:	Lease Name: Well #:					
City: State: Zip:+	3					
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:	<ul> <li>sheet listing all of the information to the left for each surface owner. Surface</li> <li>owner information can be found in the records of the register of deeds for the</li> </ul>					
Address 2:	and the second of the second sectors are sectors as a sector of the second sectors are sectors.					
City: State: Zip:+						
the KCC with a plat showing the predicted locations of lease roads, tank	dic Protection Borehole Intent), you must supply the surface owners and 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.					
owner(s) of the land upon which the subject well is or will be lo	ct (House Bill 2032), I have provided the following to the surface cated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form ceing filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address.					
	cknowledge that, because I have not provided this information, the ner(s). To mitigate the additional cost of the KCC performing this fee, 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-1	fee with this form. If the fee is not received with this form, the KSONA-1 will be returned.					
Submitted Electronically						





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

May 10, 2012

Damonica Pierson Shell Gulf of Mexico Inc. 150 N DAIRY-ASHFORD (77079) PO BOX 576 (77001-0576) HOUSTON, TX 77001-0576

Re: Drilling Pit Application API 15-007-23852-00-00 Schupbach 3510 4-1 NW/4 Sec.04-35S-10W Barber County, Kansas

Dear Damonica Pierson:

According to the drilling pit application referenced above, this pit is to be used for fresh water only. A closed loop system is to be utilized.

. If you have any questions or concerns please feel free to contact the District Office at (620) 225-8888.

### **Summary of Changes**

Lease Name and Number: Schupbach 3510 4-1

API/Permit #: 15-007-23852-00-00

Doc ID: 1078120

Correction Number: 1

Approved By: Rick Hestermann 05/10/2012

Field Name	Previous Value	New Value		
Depth to Shallowest Fresh Water	10	9		
Expected Spud Date	09/19/2012	09/26/2012		
Feet to Nearest Water Well Within One-Mile of	2005	2011		
Pit Formation At Total Depth	Arbuckle	Reagan Sandstone		
KCC Only - Approved By	Rick Hestermann 03/13/2012	Rick Hestermann 05/10/2012		
KCC Only - Approved Date	03/13/2012	05/10/2012		
KCC Only - Date Received	03/08/2012	05/10/2012		
LocationInfoLink	https://solar.kgs.ku.edu/kcc/detail/locationInform	https://solar.kgs.ku.edu/kcc/detail/locationInform		
Nearest Lease Or Unit Boundary	ation.cfm?section=4&to 327	ation.cfm?section=4&to 310		
Number of Feet North or South From Section Line	327	310		

## Summary of changes for correction 1 continued

Field Name	Previous Value	New Value
Number of Feet North or South From Section	327	310
Line Projected Total Depth	6398	6764
RFAC		Yes
Save Link	//kcc/detail/operatorE ditDetail.cfm?docID=10 75552	//kcc/detail/operatorE ditDetail.cfm?docID=10 78120

#### **Summary of Attachments**

Lease Name and Number: Schupbach 3510 4-1

API: 15-007-23852-00-00

Doc ID: 1078120

Correction Number: 1

Approved By: Rick Hestermann 05/10/2012

Attachment Name

SCHUPBACH 3510 #4-1 LEGAL plat

SCHUPACH 3510 #4-1 - LOCATION plat

No Earthen Pits