

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:	
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:	month	day	1/00r	Spot Description:
	montn	aay	year	Sec Twp S. R DE W
OPERATOR: License#				feet from N / S Line of Section
Name:				feet from E / W Line of Section
Address 1:				Is SECTION: Regular Irregular?
Address 2:				(Note: Locate well on the Section Plat on reverse side)
City:	State:	Zip:	+	County:
Contact Person:				Lease Name: Well #:
Phone:				Field Name:
CONTRACTOR: License#				Is this a Prorated / Spaced Field?
Name:				Target Formation(s):
				Nearest Lease or unit boundary line (in footage):
Well Drilled For:	Well Class:	Type Equip	oment:	
Oil Enh F	Rec Infield	Mud F	Rotary	
Gas Stora	ige Pool Ex	t. Air Ro	otary	Water well within one-quarter mile: Yes No
Dispo	osal Wildcat	Cable	:	Public water supply well within one mile:
Seismic ;#	of Holes Other			Depth to bottom of fresh water:
Other:				Depth to bottom of usable water:
If OWNO, aldall	information as follow	10:		Surface Pipe by Alternate: II II
II OWWO: old well	information as follow	/S:		Length of Surface Pipe Planned to be set:
Operator:				Length of Conductor Pipe (if any):
Well Name:				Projected Total Depth:
Original Completion Da	ate: O	riginal Total Depth	:	Formation at Total Depth:
				Water Source for Drilling Operations:
Directional, Deviated or Ho	rizontal wellbore?		Yes No	Well Farm Pond Other:
If Yes, true vertical depth: _				DWK Femili #
Bottom Hole Location:				(Note: Apply for Fernit with DVIX
KCC DKT #:				Will Cores be taken?
				If Yes, proposed zone:
			A.F.	FIDA//IT
The undersigned hereby	offirms that the drill	ing completion of		FIDAVIT
				ugging of this well will comply with K.S.A. 55 et. seq.
It is agreed that the follow	ving minimum requi	rements will be m	net:	
 Notify the appropri 				
A copy of the approx			•	5 5 .
				t by circulating cement to the top; in all cases surface pipe shall be set
•				ne underlying formation.
				strict office on plug length and placement is necessary <i>prior to plugging</i> ;
				ged or production casing is cemented in; ed 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
				e plugged. <i>In all cases, NOTIFY district office</i> prior to any cementing.
act 20 completes	· ····································			o praggodi in an oucco, i o in i a anot o inoc prior to any comeranigi
ubmitted Electron	nically			
abilitied Liectro	lically			
For KCC Use ONLY				Remember to:
				- File Certification of Compliance with the Kansas Surface Owner Notification
API # 15				Act (KSONA-1) with Intent to Drill;
Conductor pipe required.		feet		- File Drill Pit Application (form CDP-1) with Intent to Drill; - File Completion Form ACO-1 within 120 days of spud date;
Minimum surface pipe red	quired	feet per A	LT. I II II	- File Completion Form ACO-1 within 120 days of spud date; - File acreage attribution plat according to field proration orders;
Approved by:		·		Notify appropriate district office 48 hours prior to workover or re-entry;
,				- Submit plugging report (CP-4) after plugging is completed (within 60 days);
This authorization expire		in 10 manths -f -	around data	Obtain written approval before disposing or injecting salt water.
(This authorization void if a	riiiriy riot startea Withi	п типопить от арр	ıı uvaı üäle.)	- If well will not be drilled or permit has expired (See: authorized expiration date)

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

Spud date: _

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.

Lease:										_feet from	N/ SL	ine of Section
Well Number:Field:					feet from E / W Line of Sec Twp S. R E V							
				Se								
Number of Acres attributable to well:			_	Is Section: Regular or Irregular If Section is Irregular, locate well from nearest corner boundary.								
									er used: NE			undary.
					-				dary line. Show th	•		
	lease roads	s, tank ba		pelines and				by the Kans plat if desi		er Notice A	Act (House Bill 2032).	
2006	:			: : : :		: : : :	:	: : : :		LE	GEND	
990 ft. –							 	:		Tan	II Location k Battery Locatior eline Location	1
					•••••						ctric Line Location ase Road Location	
				2		<u>:</u>	: :	<u>:</u>	EXAM	PLE :		
						: : : :				:		
					•••••	:	i	:		•	1	1980' FSL
			•••••		•••••	: :	: : :	:				
				•		:	:	:	SEWARD (CO . 3390' l	FEL	

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.

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

- 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 1086746

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	Pit is: Proposed If Existing, date co	Existing	SecTwp R		
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	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 (fe	et)	Width (feet) N/A: Steel Pits		
Depth fro	om ground level to dee	epest point:	(feet) No Pit		
material, thickness and installation procedure.			ncluding 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		Drill pits must be closed within 365 days of spud date.			
Submitted Electronically					
	ксс	OFFICE USE O	NLY Liner Steel Pit RFAC RFAS		
Date Received: Permit Num	ber:	Permi	it Date: Lease Inspection:		

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 (Ca	athodic Protection Borehole Intent)				
OPERATOR: License #	Well Location:				
Name:	SecTwpS. R				
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:					
are preliminary non-binding estimates. The locations may be entered on Select one of the following: ☐ I certify that, pursuant to the Kansas Surface Owner Notice Acowner(s) of the land upon which the subject well is or will be loce CP-1 that I am filing in connection with this form; 2) if the form be form; and 3) my operator name, address, phone number, fax, an ☐ I have not provided this information to the surface owner(s). I ack KCC will be required to send this information to the surface own task, I acknowledge that I am being charged a \$30.00 handling for the surface of the surface own task, I acknowledge that I am being charged a \$30.00 handling for the surface own task, I acknowledge that I am being charged a \$30.00 handling for the surface own task.	batteries, pipelines, and electrical lines. The locations shown on the plat the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. 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 eing filed is a Form C-1 or Form CB-1, the plat(s) required by this ad email address. cknowledge that, because I have not provided this information, the ner(s). To mitigate the additional cost of the KCC performing this				
form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 Submitted Electronically					
r					

Summary of Changes

Lease Name and Number: Lottie Burnett 4-22-2027

API/Permit #: 15-101-22385-00-00

Doc ID: 1086746

Correction Number: 1

Approved By: Rick Hestermann 07/09/2012

Field Name	Previous Value	New Value
Formation At Total Depth	Mississippi Osage	Arbuckle
KCC Only - Approved By	NAOMI JAMES 06/20/2012	Rick Hestermann 07/09/2012
KCC Only - Approved Date	06/20/2012	07/09/2012
KCC Only - Date Received	06/19/2012	07/09/2012
Projected Total Depth	5000	5300
Save Link	//kcc/detail/operatorE ditDetail.cfm?docID=10 85132	//kcc/detail/operatorE ditDetail.cfm?docID=10 86746