

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

1089930

Form C-1

March 2010

Form must be Typed

Form must be Signed

All blanks must be Filled

# NOTICE OF INTENT TO DRILL

	e (5) days prior to commencing well Surface Owner Notification Act, MUST be submitted with this form.						
Expected Spud Date:	Spot Description:						
month day year							
	(Q/Q/Q/Q) section   N / S Line of Section						
OPERATOR: License#	feet from E / W Line of Section						
Name:	Is SECTION: Regular Irregular?						
Address 1:							
Address 2: State: Zip: +	(Note: Locate well on the Section Plat on reverse side)						
Contact Person:	County:						
Phone:	Lease Name: Well #:						
CONTRACTOR: Lineary	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 MSL						
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: II II						
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:	( <b>Note:</b> Apply for Permit with DWR )						
KCC DKT #:	Will Cores be taken?						
	If Yes, proposed zone:						
AE	EIDAVIT						
The undersigned hereby affirms that the drilling, completion and eventual pl	FIDAVIT						
	ugging of this well will comply with K.S.A. 55 et. seq.						
It is agreed that the following minimum requirements will be met:							
<ol> <li>Notify the appropriate district office <i>prior</i> to spudding of well;</li> </ol>							
2. A copy of the approved notice of intent to drill <b>shall be</b> posted on each	5 5,						
<ol><li>The minimum amount of surface pipe as specified below shall be set through all unconsolidated materials plus a minimum of 20 feet into the</li></ol>							
	strict office on plug length and placement is necessary <b>prior to plugging</b> ;						
5. The appropriate district office will be notified before well is either plug	, , , , , , , , , , , , , , , , , , , ,						
11 1	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						
must be completed within 30 days of the spud date or the well shall b	e plugged. In all cases, NOTIFY district office prior to any cementing.						
Submitted Electronically							
	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;						
Conductor pipe requiredfeet	- 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 requiredfeet per ALTIII	- File acreage attribution plat according to field proration orders;						
Approved by:	Notify appropriate district office 48 hours prior to workover or re-entry;						
This authorization expires:	<ul> <li>Submit plugging report (CP-4) after plugging is completed (within 60 days);</li> </ul>						
(This authorization void if drilling not started within 12 months of approval date.)	- Obtain written approval before disposing or injecting salt water.						

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

Spud date: \_



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: \_\_\_

Lease:										fe	eet from	N /	S Line	of Section
Well Number	er:									fe	eet from	E /	W Line	of Section
Field:							Se	c	Twp		S. R		E	W
Number of A							15 1	Section:	Regula	ar or	Irregu	ar		
QINQIN	QIK/QIK	oi acreay	е		- <del>-</del>		If S	Section is	_			nearest co		dary.
		ids, tank b			d electrica	the neare	required b	y the Kans	sas Surface			d locations ct (House E		
		:	:	:		:	:	:			LEG	GEND		
											☐ Tanl — Pipe · Elec	Location  Battery Leline Locatoric Line Locatoric Locato	tion ocation	
1080 ft				3	 6 	: : : : :				EXAMPL				
										••••	γ <del>-</del>			1980' FSL
										5144 BB 00			;	

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

089930

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)	Pit is:  Proposed  If Existing, date continue prit capacity:	Existing nstructed: (bbls)	SecTwpR East WestFeet from North / South Line of SectionFeet from East / West Line of SectionCounty				
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 (fee	et)	Width (feet) N/A: Steel Pits				
If the pit is lined give a brief description of the li material, thickness and installation procedure.	om ground level to dee	Describe proce	dures for periodic maintenance and determining any special monitoring.				
Distance to nearest water well within one-mile	of pit:	Depth to shallo Source of infor	west fresh water feet. mation:				
feet Depth of water well	feet	measured	well owner electric log KDWR				
Emergency, Settling and Burn Pits ONLY:  Producing Formation:  Number of producing wells on lease:  Barrels of fluid produced daily:  Does the slope from the tank battery allow all s flow into the pit?  Yes No  Submitted Electronically		Type of materia  Number of work  Abandonment p  Drill pits must b	over and Haul-Off Pits ONLY:  all utilized in drilling/workover:  king pits to be utilized:  procedure:  de closed within 365 days of spud date.				
KCC OFFICE USE ONLY							
Date Received: Permit Num	ber:		Liner Steel Pit RFAC RFAS  t Date: Lease Inspection: Yes No				



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

1089930

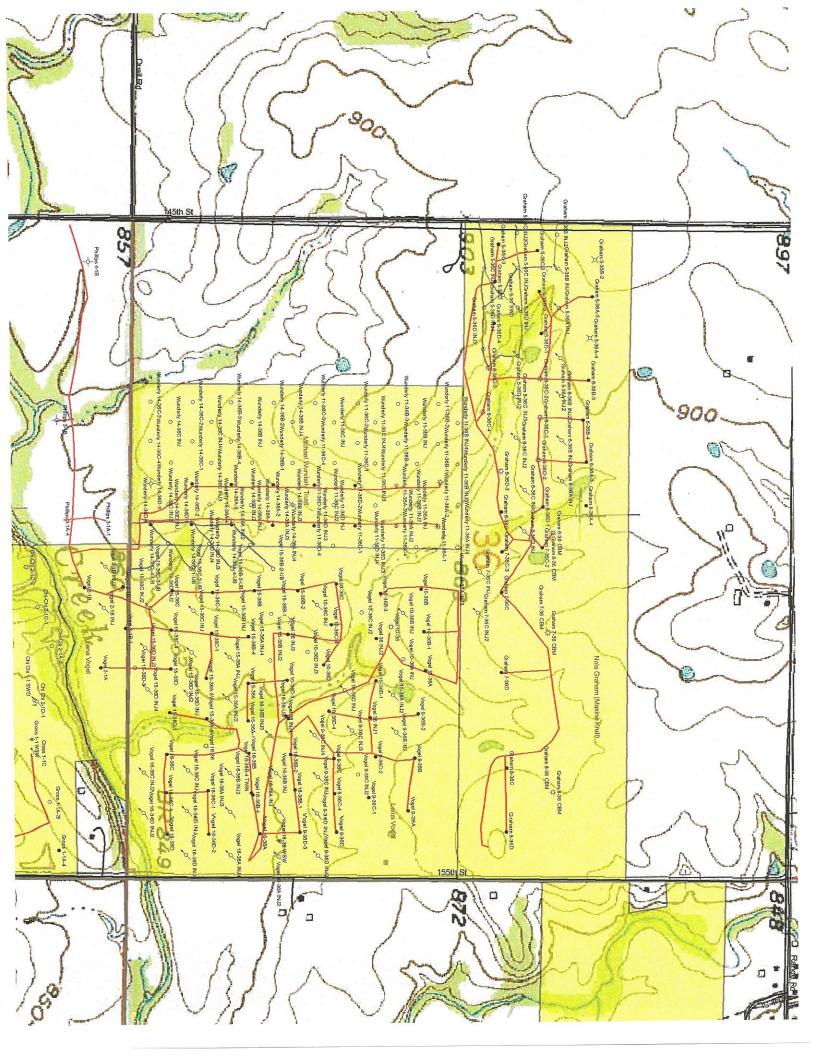
Form KSONA-1
July 2010
Form Must Be Typed
Form must be Signed
All blanks must be Filled

# 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)						
OPERATOR: License #	Well Location:						
Name:	SecTwpS. R						
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 or						
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 additiona						
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:							
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.						
I certify that, pursuant to the Kansas Surface Owner Notice Adowner(s) of the land upon which the subject well is or will be lo CP-1 that I am filing in connection with this form; 2) if the form b form; and 3) my operator name, address, phone number, fax, are	ct (House Bill 2032), I have provided the following to the surface potential:  1) a copy of the Form C-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.  1) cknowledge that, because I have not provided this information, the						
KCC will be required to send this information to the surface ow	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/

Mark Sievers, Chairman Thomas E. Wright, Commissioner Sam Brownback, Governor

## NOTICE TO OPERATORS FILING INTENT TO DRILL FOR DISPOSAL OR ENHANCED RECOVERY INJECTION WELLS, (CLASS II INJECTION WELL)

The attached approved Notice of Intent to Drill indicates the proposed well is to be used for injection. An approved "Intent to Drill" does not approve injection authority as a Class II Injection Well in Kansas.

Before any well is used for injection purposes, the operator must file an application for injection authority in accordance with K.A.R. 82-3-401 and provide notice in accordance with K.A.R. 82-3-402. The Conservation Division must issue a written permit granting the application before commencement of injection.

The Conservation Division requirements and restrictions associated with Class II Injection are identified in K.A.R. 82-3-400 et seq of our regulations. Associated regulations governing drilling, completion and injection applications may be found in K.A.R. 82-3-135, Table I, Table II, in the Cedar Hills Sandstone Moratorium, (Docket #156,397-C), and the Eastern Kansas Surface Casing Order, (Docket #133,891-C).

If you have questions regarding the approval of injection authority, an injection application may be filed as a "Design Approval" before actual drilling and completion of the well occurs. If you have any questions or concerns regarding Class II injection wells or regulations, call the Underground Injection Control Department at 316-337-6200.

Failure to obtain commission approval before beginning injection is punishable by a penalty, shut-in of the well or both.