



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

KANSAS CORPORATION COMMISSION 1090801  
 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**

**Must be approved by KCC five (5) days prior to commencing well**

**Form KSONA-1, Certification of Compliance with the Kansas Surface Owner Notification Act, MUST be submitted with this form.**

Expected Spud Date: \_\_\_\_\_  
   month  day  year

OPERATOR: License# \_\_\_\_\_  
 Name: \_\_\_\_\_  
 Address 1: \_\_\_\_\_  
 Address 2: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ + \_\_\_\_\_  
 Contact Person: \_\_\_\_\_  
 Phone: \_\_\_\_\_

CONTRACTOR: License# \_\_\_\_\_  
 Name: \_\_\_\_\_

Well Drilled For:	Well Class:	Type Equipment:
<input type="checkbox"/> Oil	<input type="checkbox"/> Enh Rec	<input type="checkbox"/> Infield
<input type="checkbox"/> Gas	<input type="checkbox"/> Storage	<input type="checkbox"/> Pool Ext.
	<input type="checkbox"/> Disposal	<input type="checkbox"/> Wildcat
<input type="checkbox"/> Seismic ; _____ # of Holes	<input type="checkbox"/> Other	<input type="checkbox"/> Mud Rotary
<input type="checkbox"/> Other: _____		<input type="checkbox"/> Air Rotary
		<input type="checkbox"/> Cable
<input type="checkbox"/> If OWWO: old well information as follows:		

Operator: \_\_\_\_\_  
 Well Name: \_\_\_\_\_  
 Original Completion Date: \_\_\_\_\_ Original Total Depth: \_\_\_\_\_

Directional, Deviated or Horizontal wellbore?  Yes  No  
 If Yes, true vertical depth: \_\_\_\_\_  
 Bottom Hole Location: \_\_\_\_\_  
 KCC DKT #: \_\_\_\_\_

Spot Description: \_\_\_\_\_  
 \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  E  W  
 (Q/Q/Q/Q) \_\_\_\_\_ 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: \_\_\_\_\_  
 Lease Name: \_\_\_\_\_ Well #: \_\_\_\_\_

Field Name: \_\_\_\_\_  
 Is this a Prorated / Spaced Field?  Yes  No

Target Formation(s): \_\_\_\_\_  
 Nearest Lease or unit boundary line (in footage): \_\_\_\_\_

Ground Surface Elevation: \_\_\_\_\_ feet MSL  
 Water well within one-quarter mile:  Yes  No

Public water supply well within one mile:  Yes  No  
 Depth to bottom of fresh water: \_\_\_\_\_

Depth to bottom of usable water: \_\_\_\_\_  
 Surface Pipe by Alternate:  I  II

Length of Surface Pipe Planned to be set: \_\_\_\_\_  
 Length of Conductor Pipe (if any): \_\_\_\_\_

Projected Total Depth: \_\_\_\_\_  
 Formation at Total Depth: \_\_\_\_\_

Water Source for Drilling Operations:  
 Well  Farm Pond  Other: \_\_\_\_\_

DWR Permit #: \_\_\_\_\_  
 (Note: Apply for Permit with DWR )

Will Cores be taken?  Yes  No  
 If Yes, proposed zone: \_\_\_\_\_

**AFFIDAVIT**

The undersigned hereby affirms that the drilling, completion and eventual plugging of this well will comply with K.S.A. 55 et. seq.

It is agreed that the following minimum requirements will be met:

1. Notify the appropriate district office **prior** to spudding of well;
2. A copy of the approved notice of intent to drill **shall be** posted on each drilling rig;
3. The minimum amount of surface pipe as specified below **shall be set** 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 the underlying formation.
4. If the well is dry hole, an agreement between the operator and the district office on plug length and placement is necessary **prior to plugging**;
5. The appropriate district office will be notified before well is either plugged or production casing is cemented in;
6. If an ALTERNATE II COMPLETION, production pipe shall be cemented from below any usable water to surface within **120 DAYS** of spud date.  
 Or pursuant to Appendix "B" - Eastern Kansas surface casing order #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 be plugged. **In all cases, NOTIFY district office** prior to any cementing.

**Submitted Electronically**

**For KCC Use ONLY**

API # 15 - \_\_\_\_\_

Conductor pipe required \_\_\_\_\_ feet

Minimum surface pipe required \_\_\_\_\_ feet per ALT.  I  II

Approved by: \_\_\_\_\_

**This authorization expires:** \_\_\_\_\_  
 (This authorization void if drilling not started within 12 months of approval date.)

Spud date: \_\_\_\_\_ Agent: \_\_\_\_\_

**Remember to:**

- File Certification of Compliance with the Kansas Surface Owner Notification 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;
- Submit plugging report (CP-4) after plugging is completed (within 60 days);
- Obtain written approval before disposing or injecting salt water.
- If well will not be drilled or permit has expired (See: authorized expiration 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: \_\_\_\_\_

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

E W



1090801

**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: \_\_\_\_\_

Lease: \_\_\_\_\_

Well Number: \_\_\_\_\_

Field: \_\_\_\_\_

Number of Acres attributable to well: \_\_\_\_\_

QTR/QTR/QTR/QTR of acreage: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Location of Well: County: \_\_\_\_\_

\_\_\_\_\_ feet from  N /  S Line of Section

\_\_\_\_\_ feet from  E /  W Line of Section

Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  E  W

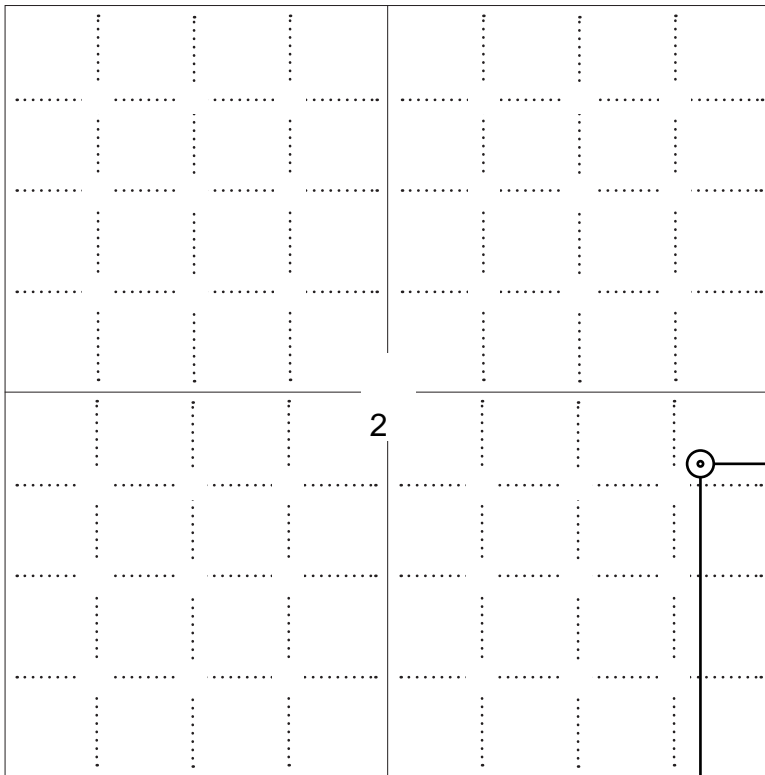
Is Section:  Regular or  Irregular

**If Section is Irregular, locate well from nearest corner boundary.**

Section corner used:  NE  NW  SE  SW

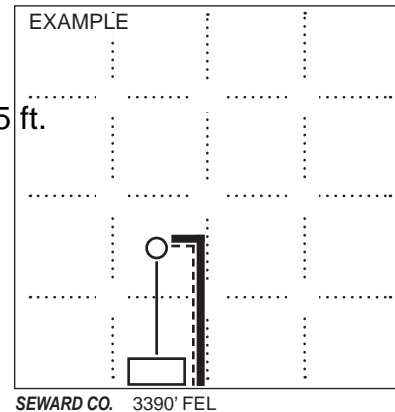
### PLAT

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
- Electric Line Location
- Lease Road Location



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

2145 ft.

#### In plotting the proposed location of the well, you must show:

- 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.
- The distance of the proposed drilling location from the south / north and east / west outside section lines.
- The distance to the nearest lease or unit boundary line (in footage).
- 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).
- The predicted locations of lease roads, tank batteries, pipelines, and electrical lines.



KANSAS CORPORATION COMMISSION 1090801  
OIL & GAS CONSERVATION DIVISION

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: <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Burn Pit <input type="checkbox"/> Settling Pit <input type="checkbox"/> Drilling Pit <input type="checkbox"/> Workover Pit <input type="checkbox"/> Haul-Off Pit <i>(If WP Supply API No. or Year Drilled)</i>		Pit is: <input type="checkbox"/> Proposed <input type="checkbox"/> Existing If Existing, date constructed: _____ Pit capacity: _____ (bbls)	
Is the pit located in a Sensitive Ground Water Area? <input type="checkbox"/> Yes <input type="checkbox"/> No		Chloride concentration: _____ mg/l <i>(For Emergency Pits and Settling Pits only)</i>	
Is the bottom below ground level? <input type="checkbox"/> Yes <input type="checkbox"/> No		Artificial Liner? <input type="checkbox"/> Yes <input type="checkbox"/> No	
How is the pit lined if a plastic liner is not used?			
Pit dimensions (all but working pits):    _____ Length (feet)    _____ Width (feet) <input type="checkbox"/> N/A: Steel Pits Depth from ground level to deepest point: _____ (feet) <input type="checkbox"/> No Pit			
If the pit is lined give a brief description of the liner material, thickness and installation procedure.		Describe procedures for periodic maintenance and determining liner integrity, including any special monitoring.	
Distance to nearest water well within one-mile of pit: _____ feet    Depth of water well _____ feet		Depth to shallowest fresh water _____ feet. Source of information: <input type="checkbox"/> measured <input type="checkbox"/> well owner <input type="checkbox"/> electric log <input type="checkbox"/> KDWR	
<b>Emergency, Settling and Burn Pits ONLY:</b> Producing Formation: _____ Number of producing wells on lease: _____ Barrels of fluid produced daily: _____ Does the slope from the tank battery allow all spilled fluids to flow into the pit? <input type="checkbox"/> Yes <input type="checkbox"/> No		<b>Drilling, Workover and Haul-Off Pits ONLY:</b> Type of material utilized in drilling/workover: _____ Number of working pits to be utilized: _____ Abandonment procedure: _____ _____ Drill pits must be closed within 365 days of spud date.	
<p><b>Submitted Electronically</b></p>			

**KCC OFFICE USE ONLY**

Liner     Steel Pit     RFAC     RFAS

Date Received: \_\_\_\_\_ Permit Number: \_\_\_\_\_ Permit Date: \_\_\_\_\_ Lease Inspection:     Yes     No



# 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 # \_\_\_\_\_  
Name: \_\_\_\_\_  
Address 1: \_\_\_\_\_  
Address 2: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ + \_\_\_\_\_  
Contact Person: \_\_\_\_\_  
Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ Fax: ( \_\_\_\_\_ ) \_\_\_\_\_  
Email Address: \_\_\_\_\_

Well Location:  
\_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_ Sec. \_\_\_\_ Twp. \_\_\_\_ S. R. \_\_\_\_  East  West  
County: \_\_\_\_\_  
Lease Name: \_\_\_\_\_ Well #: \_\_\_\_\_

*If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:*

### Surface Owner Information:

Name: \_\_\_\_\_  
Address 1: \_\_\_\_\_  
Address 2: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ + \_\_\_\_\_

*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.*

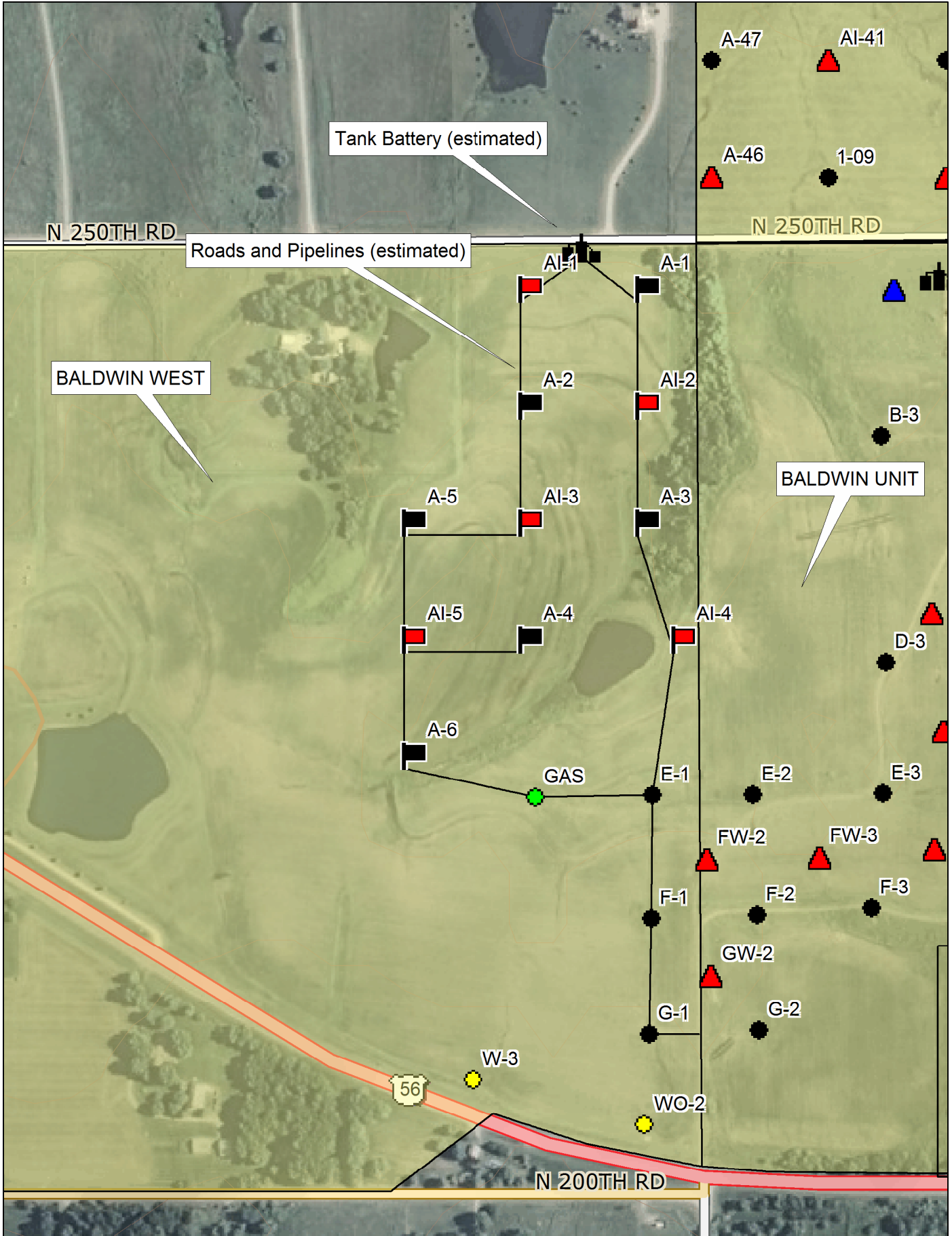
*If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.*

### Select one of the following:

- I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address.
- I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.

*If choosing the second option, submit payment of the \$30.00 handling fee with this form. If the fee is not received with this form, the KSONA-1 form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be returned.*

I Submitted Electronically



August 15, 2012

Phil Frick  
Altavista Energy, Inc.  
4595 K-33 Highway  
PO BOX 128  
WELLSVILLE, KS 66092

Re: Notice of Intent to Drill  
Baldwin West A-2  
SE/4 Sec.02-15S-20E  
Douglas County, Kansas

Dear Mr. Frick:

Records indicate that a domestic water well is located within than 660 feet of this proposed location. Eastern Kansas Surface Casing Order #133,891-C for Area 3, paragraph 2 states, "No well shall be drilled closer than 660 feet of an existing domestic or municipal water well without written owner notification, a copy of which must be attached to the drilling intent form during filing. Special casing and cementing requirements may be imposed in those areas producing fresh and usable water."

Please provide us with a copy of the owner notification to further the processing of your notice of intent to drill. A copy of the water well record is attached.

I may be contacted at 316-337-6200 if you need additional information.

Rick Hestermann  
Production Department



Scan of WWC5 Form

WATER WELL RECORD Form WWC-5 KSA 82a-1212

LOCATION OF WATER WELL		Fraction		Section Number		Township Number		Range Number	
County: <u>Douglas</u>		<u>NE 1/4 NE 1/4 SE 1/4</u>		<u>2</u>		T <u>15</u> S		R <u>20</u> (BW)	
Distance and direction from nearest town or city? <u>Baldwin</u>					Street address of well if located within city?				
WATER WELL OWNER: <u>Fred Wiseman</u>					Board of Agriculture, Division of Water Resources				
RR #, St. Address, Box #: <u>RR Wellsville</u>					Application Number:				
City, State, ZIP Code: <u>Wellsville</u>									
DEPTH OF COMPLETED WELL: <u>40</u> ft.		Bore Hole Diameter: <u>12</u> in. to <u>40</u> in.							
Well Water to be used as:									
<input checked="" type="checkbox"/> Domestic		<input type="checkbox"/> 3 Feedlot		<input type="checkbox"/> 5 Public water supply		<input type="checkbox"/> 8 Air conditioning		<input type="checkbox"/> 11 Injection well	
<input type="checkbox"/> 2 Irrigation		<input type="checkbox"/> 4 Industrial		<input type="checkbox"/> 6 Oil field water supply		<input type="checkbox"/> 9 Dewatering		<input type="checkbox"/> 12 Other (Specify below)	
<input type="checkbox"/> 7 Lawn and garden only		<input type="checkbox"/> 10 Observation well							
Well's static water level: <u>20</u> ft. below land surface measured on <u>Aug</u> month <u>18</u> day <u>81</u> year									
Pump Test Data		Well water was		ft. after		hours pumping		gpm	
St. Yield <u>2</u> gpm:		Well water was		ft. after		hours pumping		gpm	
TYPE OF CASING USED:									
<input checked="" type="checkbox"/> 1 Steel		<input type="checkbox"/> 3 RMP (SR)		<input type="checkbox"/> 5 Wrought iron		<input type="checkbox"/> 8 Concrete tile		<input checked="" type="checkbox"/> Casing Joints <u>Glued</u> ... Clamped <input checked="" type="checkbox"/>	
<input checked="" type="checkbox"/> 2 PVC		<input type="checkbox"/> ABS		<input type="checkbox"/> 6 Asbestos-Cement		<input type="checkbox"/> 9 Other (specify below)		Welded	
Casing dia: <u>8 1/4</u> in. to <u>20</u> in.		Dia: <u>Sch 40</u> in. to		Dia: <u>Sch 40</u> in. to		Dia: <u>Sch 40</u> in. to		Dia: <u>Sch 40</u> in. to	
Casing height above land surface: <u>18</u> in.		Weight: <u>Sch 40</u> lbs./ft.		Wall thickness or gauge No: <u>Sch 40</u>					
TYPE OF SCREEN OR PERFORATION MATERIAL:									
<input type="checkbox"/> 1 Steel		<input type="checkbox"/> 3 Stainless steel		<input type="checkbox"/> 5 Fiberglass		<input checked="" type="checkbox"/> 7 PVC		<input type="checkbox"/> 10 Asbestos-cement	
<input type="checkbox"/> 2 Brass		<input type="checkbox"/> 4 Galvanized steel		<input type="checkbox"/> 6 Concrete tile		<input type="checkbox"/> 8 RMP (SR)		<input type="checkbox"/> 11 Other (specify)	
<input type="checkbox"/> 9 ABS		<input type="checkbox"/> 12 None used (open hole)							
Screen or Perforation Openings Are:									
<input type="checkbox"/> 1 Continuous slot		<input checked="" type="checkbox"/> Mill slot		<input type="checkbox"/> 5 Gauzed wrapped		<input type="checkbox"/> 8 Saw cut		<input type="checkbox"/> 11 None (open hole)	
<input type="checkbox"/> 2 Louvered shutter		<input type="checkbox"/> 4 Key punched		<input type="checkbox"/> 6 Wire wrapped		<input type="checkbox"/> 9 Drilled holes		<input type="checkbox"/> 10 Other (specify)	
<input type="checkbox"/> 7 Torch cut									
Screen-Perforation Dia: <u>20</u> in. to <u>40</u> in.		Dia: <u>20</u> in. to <u>40</u> in.		Dia: <u>20</u> in. to <u>40</u> in.		Dia: <u>20</u> in. to <u>40</u> in.		Dia: <u>20</u> in. to <u>40</u> in.	
Screen-Perforated Intervals:		From <u>20</u> ft. to <u>40</u> ft.		From <u>20</u> ft. to <u>40</u> ft.		From <u>20</u> ft. to <u>40</u> ft.		From <u>20</u> ft. to <u>40</u> ft.	
Travel Pack Intervals:		From <u>20</u> ft. to <u>40</u> ft.		From <u>20</u> ft. to <u>40</u> ft.		From <u>20</u> ft. to <u>40</u> ft.		From <u>20</u> ft. to <u>40</u> ft.	
GROUT MATERIAL:									
<input checked="" type="checkbox"/> Neat cement		<input type="checkbox"/> 2 Cement grout		<input type="checkbox"/> 3 Bentonite		<input type="checkbox"/> 4 Other			
Grouted Intervals: From <u>0</u> ft. to <u>20</u> ft.		From <u>0</u> ft. to <u>20</u> ft.		From <u>0</u> ft. to <u>20</u> ft.		From <u>0</u> ft. to <u>20</u> ft.		From <u>0</u> ft. to <u>20</u> ft.	
What is the nearest source of possible contamination:									
<input type="checkbox"/> 1 Septic tank		<input type="checkbox"/> 4 Cess pool		<input type="checkbox"/> 7 Sewage lagoon		<input type="checkbox"/> 10 Fuel storage		<input type="checkbox"/> 14 Abandoned water well	
<input type="checkbox"/> 2 Sewer lines		<input type="checkbox"/> 5 Soepage pit		<input type="checkbox"/> 8 Feed yard		<input type="checkbox"/> 11 Fertilizer storage		<input type="checkbox"/> 15 Oil well/Gas well	
<input type="checkbox"/> 3 Lateral lines		<input type="checkbox"/> 6 Pit privy		<input type="checkbox"/> 9 Livestock pens		<input type="checkbox"/> 12 Insecticide storage		<input checked="" type="checkbox"/> 16 Other (specify below) <u>Pond</u>	
Direction from well: <u>North</u>		How many feet: <u>50</u>		Water Well Disinfected? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Pump installed? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		If yes, date sample submitted: <u>Aug 18</u> month <u>18</u> day <u>81</u> year	
Was a chemical/bacteriological sample submitted to Department? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Pump Manufacturer's name: <u>Royce Subart</u>		Model No.:		HP:		Volts:	
Depth of Pump Intake: <u>20</u> ft.		Pumps Capacity rated at: <u>20</u> gal/min.		Type of pump: <input checked="" type="checkbox"/> 1 Submersible <input type="checkbox"/> 2 Turbine <input type="checkbox"/> 3 Jet <input type="checkbox"/> 4 Centrifugal <input type="checkbox"/> 5 Reciprocating <input type="checkbox"/> 6 Other					
CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <input checked="" type="checkbox"/> (1) constructed, <input type="checkbox"/> (2) reconstructed, or <input type="checkbox"/> (3) plugged under my jurisdiction and was completed on <u>Aug 18</u> month <u>18</u> day <u>81</u> year.									
I find this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>371</u>									
This Water Well Record was completed on <u>Jan 31</u> month <u>31</u> day <u>81</u> year under the business name of <u>Royce Subart Drilling</u> by (signature) <u>Royce Subart</u>									
LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		FROM		LITHOLOGIC LOG		FROM		TO	
		<u>0</u> TO <u>10</u>		<u>Soil + Clay</u>		<u>04</u>			
		<u>10</u> TO <u>30</u>		<u>Yellow Sand Rock</u>		<u>23</u>			
		<u>30</u> TO <u>40</u>		<u>Shald Blue</u>		<u>19</u>			
ELEVATION:		Top(s) Groundwater Encountered <u>1.20</u> ft. 2. <u>20</u> ft. 3. <u>20</u> ft. 4. <u>20</u> ft.							

OFFICE USE ONLY  
T  
R  
SEC.

Kansas Geological Survey  
 Comments to webadmin@kgs.ku.edu  
 URL=http://www.kgs.ku.edu/Magellan/WaterWell/index.html

Display Programs Updated July 29, 2004  
Data added continuously.





ALTAVISTA ENERGY, INC  
OIL DEVELOPMENT, LEASING & OPERATING

P. O. Box 128  
WELLSVILLE, KS 66092  
(785) 883-4057

August 16, 2012

Frank Turley  
1881 N 250th Rd  
Baldwin City, KS 66006

RE: Oil and Water Injection Well Drilling by Altavista Energy, Inc.

Mr. Turley,

Altavista Energy, Inc. is the current owner and operator of the Baldwin Unit Oil Leases, one of which includes your property. We are going to try drilling a couple wells on one of the leases that is within 660 feet of the water well I wrote you a letter about last time. This does not inherently pose any concern from an environmental or contamination standpoint, but we are required in cases such as this to notify the water well owner of our drilling activity. This letter serves as your notification.

As I'm sure you are aware, there are numerous oil and injection wells in your area. The wells we intend to drill that are within 660 feet of your water well are no different in design than any of the existing wells, and likely will be better-constructed given the modern well completion techniques we utilize. If you have any questions or concerns, feel free to contact me and we can discuss. Or you may contact the Kansas Corporation Commission.

NOTE: The records show that the well was drilled in 1981, so if you are not familiar with the well and/or don't utilize it, then you can disregard this letter. Also note that we are not drilling on your property, but on the property of an adjacent landowner.

Regards,

Phil Frick  
Land and Compliance  
Altavista Energy, Inc.  
785-883-4057  
dephil@dpeweb.com

September 04, 2012

Phil Frick  
Altavista Energy, Inc.  
4595 K-33 Highway  
PO BOX 128  
WELLSVILLE, KS 66092

Re: Drilling Pit Application  
Baldwin West A-2  
SE/4 Sec.02-15S-20E  
Douglas County, Kansas

Dear Phil Frick:

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.