

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

1100779

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:	Spot Description:
month day year	Sec Twp S. R
OPERATOR: License#	feet from N / S Line of Section
Name:	feet from E / W Line of Sectio
Address 1:	Is SECTION: Regular Irregular?
Address 2:	(Note: Locate well on the Section Plat on reverse side)
City:	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 Equipment:	· · · · · · · · · · · · · · · · · · ·
Oil Enh Rec Infield Mud Rotary	Ground Surface Elevation:feet MS
Gas Storage Pool Ext. Air Rotary	Water well within one-quarter mile:  Yes N
Disposal Wildcat Cable	Public water supply well within one mile: Yes N
Seismic ;# of HolesOther	Depth to bottom of fresh water:
Other:	Depth to bottom of usable water:
If OWWO: old well information as follows:	Surface Pipe by Alternate:
	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:
Directional, Deviated or Horizontal wellbore?	Water Source for Drilling Operations:
Directional, Deviated or Horizontal wellbore? Yes No  If Yes, true vertical depth:	Well Farm Pond Other:
Bottom Hole Location:	DWR Permit #:
KCC DKT #:	(Note: Apply for Permit with DWR )
	Will Cores be taken?
	If Yes, proposed zone:
AFF	IDAVIT
The undersigned hereby affirms that the drilling, completion and eventual plu	gging 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> <li>A copy of the approved notice of intent to drill <i>shall be</i> posted on each</li> </ol>	drilling rig;
<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> <li>If the well is dry hole, an agreement between the operator and the dist</li> <li>The appropriate district office will be notified before well is either plugg</li> <li>If an ALTERNATE II COMPLETION, production pipe shall be cemented</li> </ol>	underlying formation.  rict office on plug length and placement is necessary <i>prior to plugging;</i> ed or production casing is cemented in; If from below any usable water to surface within 120 DAYS of spud date.
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Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

Spud date: \_

Side Two



SEWARD CO. 3390' FEL

1980' FSL

For KCC Use ONLY	
API # 15	_

550 ft.

#### 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:		Location of Well: County:	
Lease:		feet from N / S Line of Section	on
Well Number:		feet from E / W Line of Section	on
		SecTwpS. R E W	
	well: ::	Is Section: Regular or Irregular	
		If Section is Irregular, locate well from nearest corner boundary.  Section corner used: NE NW SE SW	
	n of the well. Show footage to the nearest letteries, pipelines and electrical lines, as req	LAT  lease or unit boundary line. Show the predicted locations of quired by the Kansas Surface Owner Notice Act (House Bill 2032). separate plat if desired.	
		LEGEND	
		O Well Location  Tank Battery Location  ———————————————————————————————————	
		Lease Road Location	
		EXAMPLE	

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

#### 1175 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

00779 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  Proposed  If Existing, date con  Workover Pit  Haul-Off Pit  (If WP Supply API No. or Year Drilled)  Pit is:  Proposed  If Existing, date con  Pit 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			
Depth fro	om ground level to dee	epest point:	(feet) No Pit			
Distance to nearest water well within one-mile of	of nit-	Donth to challe	west fresh waterfeet.			
Distance to nearest water well within one-fille t	л рп.	Source of inform	nation:			
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:		Type of materia	ver and Haul-Off Pits ONLY:  I utilized in drilling/workover:  xing pits to be utilized:  procedure:			
Does the slope from the tank battery allow all s flow into the pit? Yes No	pilled fluids to	·	e closed within 365 days of spud date.			
Submitted Electronically						
	KCC	OFFICE USE O	NLY Liner Steel Pit RFAC RFAS			
Date Received: Permit Num	ber:	Permi	t Date: Lease Inspection: Yes No			



### Kansas Corporation Commission Oil & Gas Conservation Division

1100779

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 (	Cathodic Protection Borehole Intent) T-1 (Transfer) CP-1 (Plugging Application)
OPERATOR: License #	Well Location:
Name:	SecTwpS. R 🔲 East 🗌 West
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 of
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: 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 k batteries, pipelines, and electrical lines. The locations shown on the plat n the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.
Select one of the following:	
owner(s) of the land upon which the subject well is or will be le CP-1 that I am filing in connection with this form; 2) if the form I form; and 3) my operator name, address, phone number, fax, a	cknowledge that, because I have not provided this information, the vner(s). To mitigate the additional cost of the KCC performing this
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 will be returned.
Submitted Electronically	_

Township_	95	Range	15W.	County Gr	caham,	State_KS	>
	2						
			3	20			
		Þ	v	*			
0		#2	*1				
000	100 ank Battery						
Reorder No. 09-344	Kansas B 700 s. Broadw Wehla, KS 316-264-934 www.kbp.com	lue Print y PO Box 793 67201-0793 5246-5165 lax kbp@kbp.com		Lea E L	ase Road lectric Line lead Line	<i>e</i> /	FORM 45

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