

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	year	Spot Description:				
	monur	uay	year	Sec Twp S. R 🔲 E 🔲 V				
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):				
Well Drilled For:	Well Class	· Type	e Equipment:	Nearest Lease or unit boundary line (in footage):				
		,,		Ground Surface Elevation:feet MSI				
Oil Enh F			Mud Rotary	Water well within one-quarter mile:				
Gas Stora	• =		Air Rotary	Public water supply well within one mile:				
Seismic : #6			Cable	Depth to bottom of fresh water:				
Other:				Depth to bottom of usable water:				
Outer.				Surface Pipe by Alternate: I II				
If OWWO: old well	information as foll	ows:		Length of Surface Pipe Planned to be set:				
_				Length of Conductor Pipe (if any):				
Operator: Well Name:				Projected Total Depth:				
Original Completion Da								
Original Completion Do	xtc	Original lotal	Берин	Water Source for Drilling Operations:				
Directional, Deviated or Ho	rizontal wellbore?		Yes No	Well Farm Pond Other:				
If Yes, true vertical depth: _								
Bottom Hole Location:								
KCC DKT #:								
				If Yes, proposed zone:				
The consideration and the control	- (C d d d d	-910 1		FIDAVIT				
-		-		ugging of this well will comply with K.S.A. 55 et. seq.				
t is agreed that the follow	ing minimum red	uirements wi	Il be met:					
 Notify the appropris 								
2. A copy of the appro				0 0,				
				by circulating cement to the top; in all cases surface pipe shall be set be underlying formation.				
J				trict office on plug length and placement is necessary prior to plugging ;				
				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				
must be completed	I within 30 days o	of the spud da	ite or the well shall b	e plugged. In all cases, NOTIFY district office prior to any cementing.				
	_							
ubmitted Electro	nically							
For KCC Hos ONLY				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 required		fe	eet	- File Drill Pit Application (form CDP-1) with Intent to Drill;				
Minimum surface pipe red				- 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; 				
,				- Notify appropriate district office 48 flodis prior to workover of re-entry, - Submit plugging report (CP-4) after plugging is completed (within 60 days);				
This authorization expires (This authorization void if d		://-::- 10		Obtain written approval before disposing or injecting salt water.				
	riunio noi siamen W							
(This additionzation void if d	mining not started w	tnin 12 montns	of approval date.)	- 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

Agent:

Spud date: _

__feet from ___ N / ___ S Line of Section

SEWARD CO. 3390' FEL

Location of Well: County: __

For KCC Use ONLY	
API # 15	-

Operator: _

Lease: _

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.

Well Numb	oer:									fee	t from	E /	W Line	of Section
Field:							_ Se	C	Twp	S	. R		E	W
Number of Acres attributable to well:			Is Section: Regular or Irregular											
									Irregular, loc er used:					dary.
		ds, tank b			d electrica	the neare Il lines, as	required b		dary line. Sho sas Surface C ired.					
		:	: : : : :	:		:	:	:			LEG	END		
						:		:		0	Tank Pipeli	Location Battery Line Locat	ion	
915 ft.											■ Lease	e Road L	ocation	
		: : :		2	7	: : : : : :	: : : :	: : :	-	XAMPLE				
				·	•••••	·		:						
						:	:	······································			0=-			1980' FSL
		:	:	:	•••••	:	· · · · · · · · · · · · · · · · · · ·	:				•	:	

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

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 co Pit capacity:	Existing nstructed:	SecTwp R East WestFeet from North / South Line of SectionFeet from East / West Line of Section				
		(bbls)	County				
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 (fe	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 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:		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 ONLY							
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	(Cathodic Protection Borehole Intent) T-1 (Transfer) CP-1 (Plugging Application)					
OPERATOR: License #	Well Location:					
Name:						
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 descrip					
Contact Person:	the lease helow:					
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 county, and in the real estate property tax records of the county treasurer.					
Address 2:						
City:						
the KCC with a plat showing the predicted locations of lease roads, tan are preliminary non-binding estimates. The locations may be entered of Select one of the following: I certify that, pursuant to the Kansas Surface Owner Notice A owner(s) of the land upon which the subject well is or will be I CP-1 that I am filing in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax, a I have not provided this information to the surface owner(s). I a	acknowledge that, because I have not provided this information, the					
task, I acknowledge that I am being charged a \$30.00 handling	fee with this form. If the fee is not received with this form, the KSONA-1					
Submitted Electronically						

Summary of Changes

Lease Name and Number: GARDEN CITY V 3

API/Permit #: 15-055-22175-00-00

Doc ID: 1103664

Correction Number: 1

Approved By: Rick Hestermann 12/04/2012

Field Name	Previous Value	New Value
KCC Only - Approved By	Rick Hestermann 08/03/2012	Rick Hestermann 12/04/2012
KCC Only - Approved Date	08/03/2012	12/04/2012
KCC Only - Date Received	08/02/2012	12/04/2012
Number of Working Pits to be Used	1	2
Pit Capacity BBLS	16000	800
Pit Length	150	15
Pit Width	150	60
Save Link	//kcc/detail/operatorE ditDetail.cfm?docID=10 89389	//kcc/detail/operatorE ditDetail.cfm?docID=11 03664