

| For KCC | Use: | |
|------------|--------|--|
| Effective | Date: | |
| District # | | |
| SGA? | Yes No | |

Kansas Corporation Commission Oil & Gas Conservation Division

1141137

Form C-1
March 2010
Form must be Typed
Form must be Signed
All blanks must be Filled

NOTICE OF INTENT TO DRILL

| , | Surface Owner Notification Act, MUST be submitted with this form. |
|---|---|
| Expected Spud Date: | Spot Description: |
| o.a uuy you. | Sec Twp S. R E 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: | 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 Equipment: | Nearest Lease or unit boundary line (in footage): |
| | Ground Surface Elevation:feet MSL |
| Oil Enh Rec Infield Mud Rotary | Water well within one-quarter mile: |
| Gas Storage Pool Ext. Air Rotary | Public water supply well within one mile: |
| Disposal Wildcat Cable | Depth to bottom of fresh water: |
| Seismic ; # of Holes Other | Depth to bottom of usable water: |
| Other: | Surface Pipe by Alternate: |
| If OWWO: old well information as follows: | Length of Surface Pipe Planned to be set: |
| | Length of Conductor Pipe (if any): |
| Operator: | Projected Total Depth: |
| Well Name: | Formation at Total Depth: |
| Original Completion Date: Original Total Depth: | Water Source for Drilling Operations: |
| Directional, Deviated or Horizontal wellbore? | Well Farm Pond Other: |
| If Yes, true vertical depth: | — — — |
| Bottom Hole Location: | DWR Permit #:(Note: Apply for Permit with DWR) |
| KCC DKT #: | Will Cores be taken? |
| | If Yes, proposed zone: |
| | 11 166; proposed 20116. |
| AFI | FIDAVIT |
| 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: | |
| 1. Notify the appropriate district office <i>prior</i> to spudding of well; | |
| 2. A copy of the approved notice of intent to drill shall be posted on each | n drilling rig; |
| 3. The minimum amount of surface pipe as specified below shall be set | |
| through all unconsolidated materials plus a minimum of 20 feet into the | |
| 4. If the well is dry hole, an agreement between the operator and the dist | , |
| 5. The appropriate district office will be notified before well is either plugg | , , |
| 6. If an ALTERNATE II COMPLETION, production pipe shall be cemente Or pursuant to Appendix "B" - Fastern Kansas surface casing order #3 | 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. |
| | |
| | |
| ubmitted Electronically | |
| domitiod Electromodify | Damambay (a) |
| For KCC Use ONLY | Remember to: |
| | - File Certification of Compliance with the Kansas Surface Owner Notification Act (KSONA-1) with Intent to Drill; |
| API # 15 | - File Drill Pit Application (form CDP-1) with Intent to Drill; |
| Conductor pipe requiredfeet | - File Completion Form ACO-1 within 120 days of spud date; |
| Minimum surface pipe requiredfeet per ALT. I | - 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: | - Submit plugging report (CP-4) after plugging is completed (within 60 days); |
| i · | - Obtain written approval before disposing or injecting salt water. |
| (This authorization void if drilling not started within 12 months of approval date.) | - Obtain written approval before disposing of injecting salt water. |

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

Spud date: _

| 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: | |
| | |

Side Two



| 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: | Location of Well: County: |
|---|--|
| Lease: | feet from N / S Line of Section |
| Well Number: | feet from E / W Line of Section |
| Field: | SecTwpS. R 🗌 E 🔲 W |
| Number of Acres attributable to well: | Is Section: Regular or Irregular |
| | If Section is Irregular, locate well from nearest corner boundary. Section corner used: NE NW SE SW |
| Show location of the well. Show footage to the nearest le lease roads, tank batteries, pipelines and electrical lines, as req | AT case or unit boundary line. Show the predicted locations of uired by the Kansas Surface Owner Notice Act (House Bill 2032). sparate plat if desired. |
| | LEGEND |
| | O Well Location Tank Battery Location Pipeline Location |

----- Electric Line Location

Lease Road Location

20 330 ft. 1980' FSL SEWARD CO. 3390' FEL

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

1980 ft.

EXAMPLE

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

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: Pit is: | | | |
| Emergency Pit Burn Pit | | | SecTwp R |
| Settling Pit Drilling Pit | | | Feet from North / South Line of Section |
| Workover Pit Haul-Off Pit (If WP Supply API No. or Year Drilled) | Pit capacity: | | Feet from East / West Line of Section |
| (II WE Supply AFT No. of feat Diffied) | | (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? Yes No | 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. | | iller integrity, il | cluding any special monitoring. |
| Distance to nearest water well within one-mile of pit: | | Depth to shallo | west fresh water feet. |
| feet Depth of water wellfeet | | measured | well owner electric log KDWR |
| Emergency, Settling and Burn Pits ONLY: | | Drilling, Work | over and Haul-Off Pits ONLY: |
| Producing Formation: | | Type of materia | l utilized in drilling/workover: |
| Number of producing wells on lease: | | Number of working pits to be utilized: | |
| Barrels of fluid produced daily: | | Abandonment p | procedure: |
| Does the slope from the tank battery allow all spilled fluids to flow into the pit? Yes No | | Drill pits must b | e closed within 365 days of spud date. |
| Submitted Electronically | | | |
| KCC OFFICE USE ONLY Liner Steel Pit RFAC RFAS | | | |
| Date Received: Permit Num | ber: | Permi | t Date: Lease Inspection: Yes No |



1141137

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) 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: | 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, a | |
| 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: | |
| the KCC with a plat showing the predicted locations of lease roads, tank | dic Protection Borehole Intent), you must supply the surface owners and a 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. |
| Select one of the following: | |
| owner(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 the form; and 3) my operator name, address, phone number, fax, and I have not provided this information to the surface owner(s). I an KCC will be required to send this information to the surface owner(s). | cknowledge that, because I have not provided this information, the ner(s). To mitigate the additional cost of the KCC performing this |
| task, I acknowledge that I am being charged a \$30.00 handling 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 |
| Submitted Electronically | |

| For KCC Use ONLY | |
|------------------|--|
| API # 15 | |

Operator: Edward E Birk

Lease: Herr

Well Number: 1

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: Coffey

feet from

feet from X E /

N / X S Line of Section

W Line of Section

1,980

330

| Field: | Sec. 20 Twp. 21 S. R. 17 X E W |
|--|--|
| Number of Acres attributable to well: QTR/QTR/QTR of acreage: C - E2 - NE - SE | Is Section: Regular or Irregular |
| | If Section is Irregular, locate well from nearest corner boundary. Section corner used: NE NW SE SW |
| | |
| | _AT ease or unit boundary line. Show the predicted locations of |
| lease roads, tank batteries, pipelines and electrical lines, as req | uired by the Kansas Surface Owner Notice Act (House Bill 2032). Exparate plat if desired. |
| | |
| | LEGEND |
| | O Well Location Tank Battery Location |
| | Pipeline Location Electric Line Location Lease Road Location |
| | Edge Noad Eddalon |
| | EXAMPLE |
| | |
| | |
| | 1980' FSL |
| | |
| | SEWARD CO. 3390' FEI |

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- 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).
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