

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

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1145800

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 Section |
| Address 1: | Is SECTION: Regular Irregular? |
| Address 2: | (Note: Locate well on the Section Plat on reverse side) |
| City: State: Zip: + | 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 Disposal Wildcat Cable | Public water supply well within one mile: |
| Disposal Wildcat Cable Seismic : # of Holes Other | Depth to bottom of fresh water: |
| Other: | Depth to bottom of usable water: |
| | Surface Pipe by Alternate: I III |
| 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: | (Note: Apply for Permit with DWR) |
| KCC DKT #: | 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: | |
| Notify the appropriate district office <i>prior</i> to spudding of well; | |
| 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 l | 0 0, |
| 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 district. | , |
| The appropriate district office will be notified before well is either pluggIf an ALTERNATE II COMPLETION, production pipe shall be cemented | |
| | 33,891-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. |
| | |
| | |
| ubmitted 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; |
| | - File Drill Pit Application (form CDP-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; |
| Conductor pipe requiredfeet Minimum surface pipe requiredfeet per ALTIII | 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; |
| 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; |

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

_ Agent:

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.

| Date: |
|-------|
| |
| 2 |



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

IN ALL CASES PLOT THE INTENDED WELL ON THE PLAT BELOW

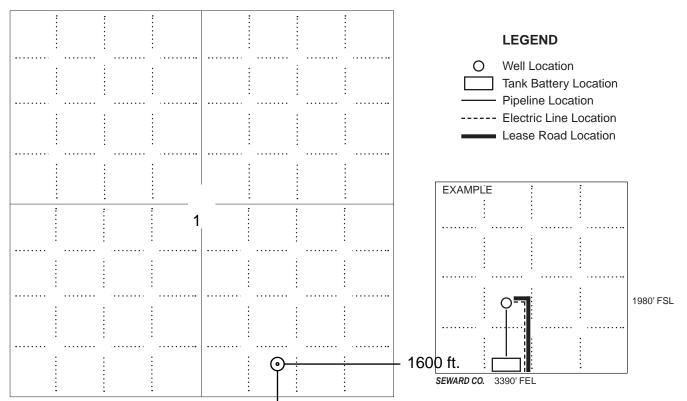
In all cases, please fully complete this side of the form. Include items 1 through 5 at the bottom of this page.

| Operator: | Location of Well: County: | | | |
|---------------------------------------|--|--|--|--|
| Lease: | feet from N / S Line of Section | | | |
| Well Number: | feet from E / W Line of Section | | | |
| Field: | Sec Twp S. R | | | |
| 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 | | | |

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.



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

450 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

1145800

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 | ☐ Emergency Pit ☐ Burn Pit ☐ Proposed ☐ Existing | | SecTwp R | | | |
| Settling Pit Drilling Pit | If Existing, date constructed: | | 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 | | | |
| | - | (bbls) | County | | | |
| 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? Yes No Artificial Liner? Yes 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 pit: | Depth to shallo Source of inforr | west fresh water feet. nation: | | | |
| feet Depth of water well | feet | measured | well owner electric log KDWR | | | |
| Emergency, Settling and Burn Pits ONLY: | | Drilling, Work | cover and Haul-Off Pits ONLY: | | | |
| Producing Formation: | | Type of materia | material utilized in drilling/workover: | | | |
| Number of producing wells on lease: | | Number of working pits to be utilized: | | | | |
| Barrels of fluid produced daily: Abandon | | | Abandonment procedure: | | | |
| Does the slope from the tank battery allow all spilled fluids to flow into the pit? Yes No | | | Drill pits must be closed within 365 days of spud date. | | | |
| Submitted Electronically | | | | | | |
| KCC OFFICE USE ONLY Liner Steel Pit RFAC RFAS | | | | | | |
| Date Received: Permit Numl | ber: | Permi | | | | |



1145800

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, 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: | |
| 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 | |



Fall & Associates

Stake and Elevation Service 719 W. 5" Street P.O. Box 404 Concordia, KS. 66901 1-800-536-2821

Date 5-23-13

| | | | | | Invoice Num | ber 0517131 |
|------------------------------|---|--------------|-----------------|-----------------|--|------------------|
| BRITO OIL C | | 1-1 | | Weber Trust | Washington, Committee or and the same of t | |
| Operat | Oi, | Number | | Farm Nam | v | |
| Logan-k County | KS y-State | 1 12s S T | 33w R | 450'FSL 1600'FE | EL | |
| Brito O 1700 N Buildin | il Company I. Waterfront Pkwy. Ig 300, Suite C Ig, KS. 67202 | | Scale 1''=1000' | | ElevationOrdered By: | 3024 Gr. Raul |
| N | | | * | | | |
| | | | | | | |
| | | | 1 | | | |
| | Set 5' Iron rod & 4' woo pasture. Ingress from S on dry creek. | | Stake | 160 | V. | TANK BATTERY |
| | 7 | Á | X | <u> </u> | * | |