

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

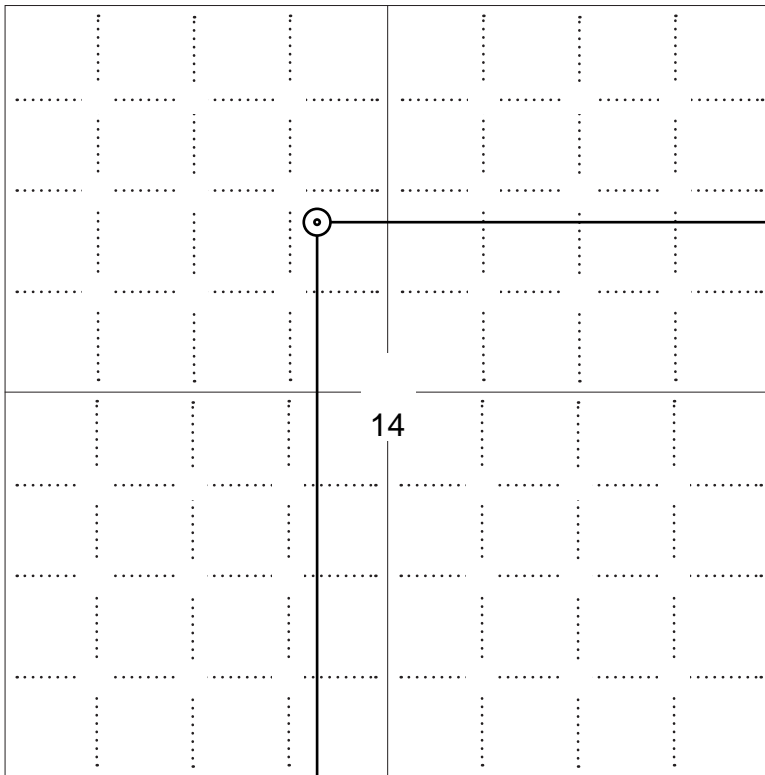
Is Section: Regular or Irregular

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.

3795 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.

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	
Emergency, Settling and Burn Pits ONLY: 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		Drilling, Workover and Haul-Off Pits ONLY: 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.	
Submitted Electronically			

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:

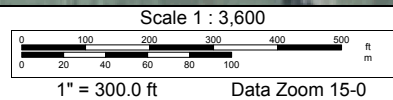
- I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this 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



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ALTAVISTA ENERGY, INC
OIL DEVELOPMENT, LEASING & OPERATING

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

July 23, 2013

Ron and Brenda Neumer
1861 N 100th Rd
Baldwin City, KS 66092

RE: Well Drilling by Altavista Energy, Inc.

To Whom It May Concern:

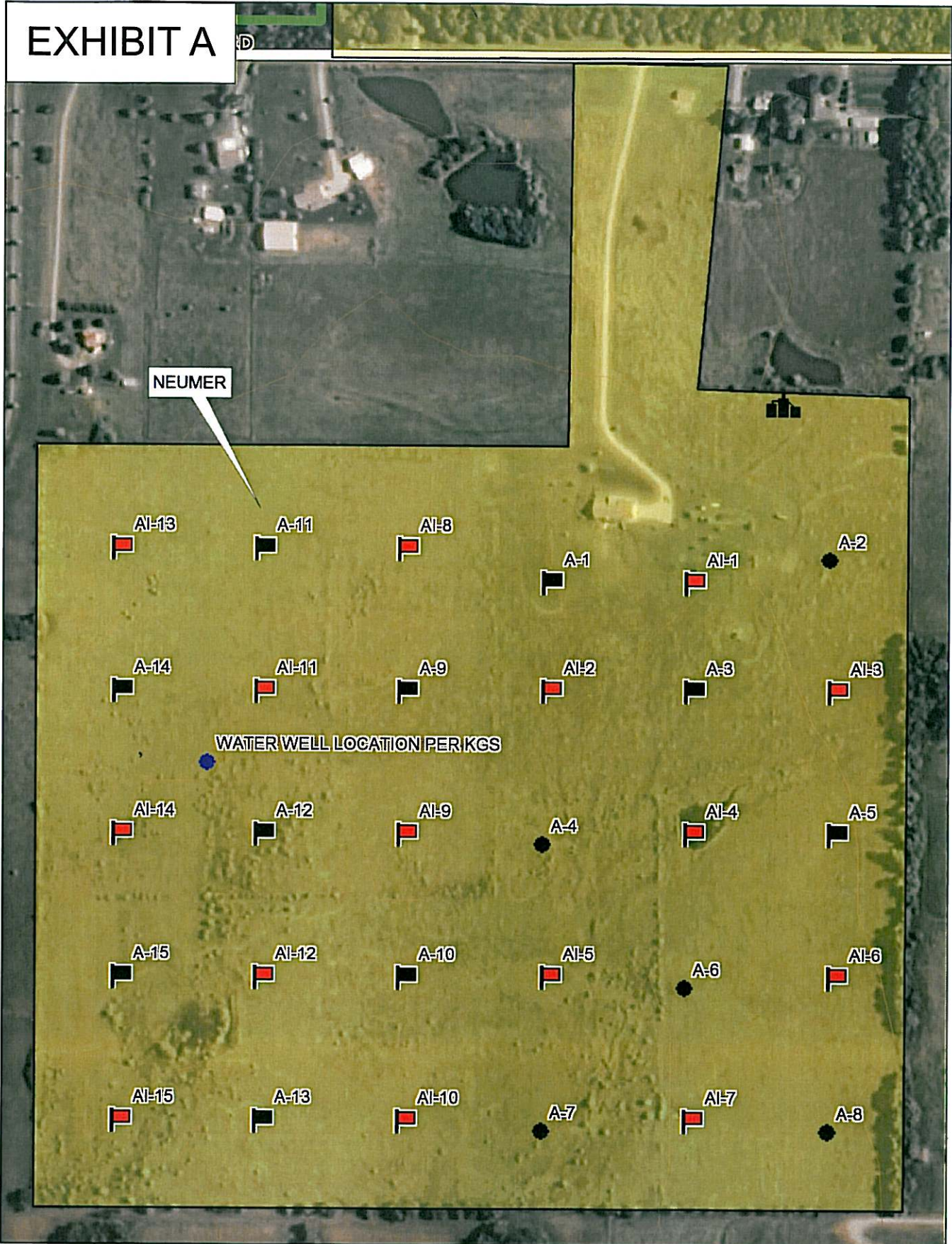
Altavista Energy, Inc. is the current owner of the Neumer Oil Lease, located on your property southeast of Baldwin City, Kansas. In the course of filing the required drilling intent forms with the Kansas Corporation Commission (KCC), it was brought to our attention that there is a domestic water well on your property that will be within 660 feet of several of our proposed well locations. 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.

If you have any questions or concerns, feel free to contact me and we can discuss. A copy of this letter has been filed with the KCC.

Regards,

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

EXHIBIT A



NEUMER

WATER WELL LOCATION PER KGS



Scan of WWC5 Form

EXHIBIT B

USE TYPEWRITER OR BALL POINT PEN--PRESS FIRMLY, PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

Kansas Department of Health and Environment--Division of Environment
(Water Well Contractors)
Topeka, Kansas 66620

95.15909; 38.74853 416

1. Location of well: County Douglas Section NE 1/4 SE 1/4 HW 1/2 Section number 14 Township number 15 Range number 20 QW

2. Distance and direction from nearest town or city: 1.5 mi W BALDWIN KAN 3. Owner of well: Charles Hines
Street address of well location if in city: R.R. or street: R#
City, state, zip code: BALDWIN KANSAS

4. Locate with "X" in section below: Sketch map:

5. Type and color of material

	From	To
soil	0	5
lime	5	7
gray shale	7	45
white sand	45	60
gray shale	60	100

6. Bore hole dia. 8 1/2 in. Completion date 3-8-78
Well depth 100 ft. 9' to 20'

7. Cables tool Battery Driven Dug
 Hollow rod Jetted Bored Reverse rotary

8. Uses: Domestic Public supply Industry
 Irrigation Air conditioning Stock
 Lawn Oil field water Other

9. Casing: Material Height: Above or below
Flared Welded Surface 20 in.
RMP PVC Weight 80 lb./ft.
Dia. 6 1/2 in. to 100 ft. depth Wall thickness: inches or
Dia. 6 1/2 in. to 100 ft. depth Pipe No. sch 40

10. Screens: Manufacturer's name CROWN LINE
Type DVC Dia. 6 1/2
Slot/ gauze 3/8 Length 20
Set between 60 ft. and 80 ft.
ft. and _____ ft.
Gravel pack? NO Size range of material _____

11. Static water level: no./day/yr. _____
20 ft. below land surface Date _____

12. Pumping level below land surface:
_____ ft. other _____ hrs. pumping _____ g.p.m.
_____ ft. other _____ hrs. pumping _____ g.p.m.
Estimated maximum yield _____ g.p.m.

13. Water sample submitted: _____ no./day/yr.
Yes No Date _____

14. Well head completion:
_____ fittings adapter 20" inches above grade

15. Well grouted?
With Neat cement Bentonite Concrete
Depth from 20 ft. to 20 ft.

16. Nearest source of possible contamination:
ft. 100 Direction S Type SEBEL
Well disinfected upon completion? Yes No

17. Pump: Not installed
Manufacturer's name _____
Model number _____ HP _____ Volts _____
Length of drop pipe _____ ft. capacity _____ g.p.m.
Type: _____
 Submersible Turbine
 Jet Reciprocating
 Centrifugal Other

18. Elevations: _____
19. Remarks: _____
Topography: _____
 Hill
 Slope
 Upland
 Valley

20. Water well contractor's certification:
This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
EDGAR SUWANK DELLINGER
Business name _____ License No. _____
Address BALDWIN KAN
Signed Edgar Suwank Date 3-8-78
Authorized representative

15909 3874853 416

Forward the white, blue and pink copies to the Department of Health and Environment

Form WWC-5

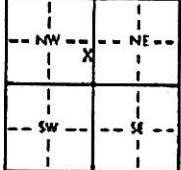
Kansas Geological Survey
Comments to webadmin@kgs.ku.edu
URL=http://www.kgs.ku.edu/Magellan/WaterWell/index.html
Display Programs Updated July 29, 2004
Data added continuously.



Scan of WWC5 Form

EXHIBIT B (CONTINUED)

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

1 LOCATION OF WATER WELL: County: DOUGLAS		Fraction NE 1/4 SE 1/4 NW 1/4	Section Number 14	Township Number T 15 S	Range Number R 20 EW
Distance and direction from nearest town or city street address of well if located within city? 1 1/2 east, 1 1/2 south of Baldwin					
2 WATER WELL OWNER: Name: Lloyd Bilhimer Address: P.O. Box 384 City, State, ZIP Code: Baldwin, KS 66006		Breuer job		Board of Agriculture, Division of Water Resources Application Number:	
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: 		4 DEPTH OF COMPLETED WELL... 100' ELEVATION: Depth(s) Groundwater Encountered 1. 30-54 ft. 2. 3 ft. WELL'S STATIC WATER LEVEL... 22' ft. below land surface measured on mo/day/yr... 4-19-95 Pump test data: Well water was... ft. after... hours pumping... gpm Est. Yield... 7 gpm: Well water was... ft. after... hours pumping... gpm Bore Hole Diameter... 8 3/4 in. to... ft. and... in. to... ft. WELL WATER TO BE USED AS: 1 Domestic 3 Feedlot 5 Public water supply 8 Air conditioning 11 Injection well 2 Irrigation 4 Industrial 7 Lawn and garden only 9 Dewatering 12 Other (Specify below) Was a chemical/bacteriological sample submitted to Department? Yes... No... X ... If yes, mo/day/yr sample was submitted Water Well Disinfected? Yes X No			
5 TYPE OF BLANK CASING USED: 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued X Clamped 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded 7 Fiberglass Threaded Blank casing diameter... 5" in. to... 0-30 ft. Dia... 5" in. to... 60-100 ft. Dia... in. to... ft. Casing height above land surface... 24" in. weight... 2.82 lbs./ft. Wall thickness or gauge No... 258 TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 10 Asbestos-cement 2 Brass 4 Galvanized steel 6 Concrete tile 8 RMP (SR) 11 Other (specify) 9 ABS 12 None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot 3 Mill slot 5 Gauzed wrapped 8 Saw cut 11 None (open hole) 2 Louvered shutter 4 Key punchod 6 Wire wrapped 9 Drilled holes 7 Torch cut 10 Other (specify) SCREEN-PERFORATED INTERVALS: From... 30 ft. to... 60 ft. From... ft. to... ft. GRAVEL PACK INTERVALS: From... 24 ft. to... 100 ft. From... ft. to... ft. 6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Grout intervals: From... 4 ft. to... 24 ft. From... ft. to... ft. What is the nearest source of possible contamination: 1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 14 Abandoned water well 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/Gas well 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below) 13 Insecticide storage Direction from well? NE How many feet? 210'					
FROM TO		LITHOLOGIC LOG		FROM TO PLUGGING INTERVALS	
0	1	Top Soil			
1	3	Clay-Brown			
3	47	Sandstone-Brown			
47	55	Sandstone-Grey			
55	100	Shale-Grey			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 4-19-95 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 182 . This Water Well Record was completed on (mo/day/yr) 3-5-95 under the business name of STRADER DRILLING CO., INC. by (signature) <i>Debra Strader</i>					
INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 813-296-6545. Send one to WATER WELL OWNER and retain one for your records.					

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.