

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

1152785

Form C-1

March 2010

Form must be Typed

Form must be Signed

All blanks must be Filled

# NOTICE OF INTENT TO DRILL

	0.48
Expected Spud Date:	Spot Description:
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	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: 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  Gas Storage Pool Ext. Air Rotary	Water well within one-quarter mile:
Disposal Wildcat Cable	Public water supply well within one mile:
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:
ΔΕ	
	IDAVIT
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For KCC Use ONLY	
API # 15	

#### IN ALL CASES PLOT THE INTENDED WELL ON THE PLAT BELOW

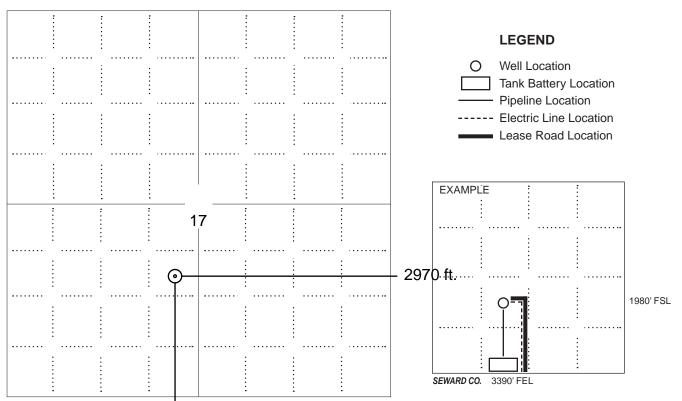
In all cases, please fully complete this side of the form. Include items 1 through 5 at the bottom of this page.

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.

## 1650 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

1152785 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  Workover Pit  Haul-Off Pit  (If WP Supply API No. or Year Drilled)	Pit is:  Proposed  If Existing, date continued.  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	water well within one-mile of pit:  Depth to shallo  Source of inforr		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:
		e closed within 365 days of spud date.	
Submitted Electronically			
	KCC	OFFICE USE O	NLY Liner Steel Pit RFAC RFAS
Date Received: Permit Numl	ber:	Permi	t Date: Lease Inspection: Yes No



1152785

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

OIL & GAS CONSERVATION DIVISION

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:			
	County:			
Address 1:	Lease Name: Well #:			
Address 2:  City: State: Zip: +				
Contact Person:	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:			
Phone: ( ) Fax: ( )				
Email Address:				
Surface Owner Information:				
Name:	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			
Address 1:				
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, 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 KCC will be required to send this information to the surface or	Act (House Bill 2032), I have provided the following to the surface located: 1) a copy of the Form C-1, Form CB-1, Form CB-1, Form CB-1, Form T-1, or Form being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address.  Cacknowledge that, because I have not provided this information, the wner(s). To mitigate the additional cost of the KCC performing this gree, payable to the KCC, which is enclosed with this form.			
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				
	_			

	- 31 # IAA
,	Eor КСС Use ОИГ

### IN ALL CASES PLOT THE INTENDED WELL ON THE PLAT BELOW

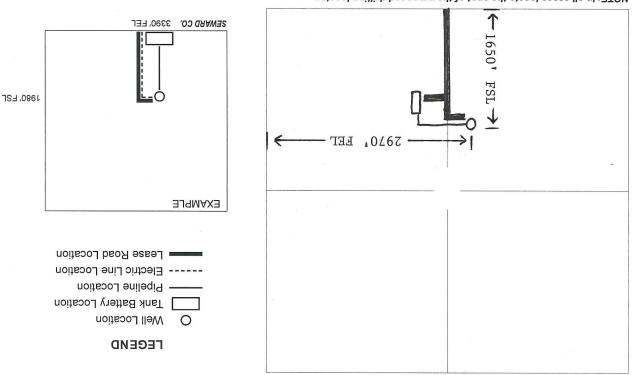
In all cases, please fully complete this side of the form. Include items 1 through 5 at the bottom of this page.

If Section is Irregular, locate well from nearest corner boundary.	
ls Section: X Regular or Inregular	Number of Acres attributable to well: 10 - SE - NE - SW
Location of Well: County: E111s   E111s   Location of Well: County: E111s   Location of Well: County: E111s   Location   Location	Operator: 5252 Lease: Meier Well Number: 2

#### **TAJ9**

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.

#### 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: (CO-7 for oil wells;
- .(G-8 for gas wells).
- $5.\ \, \text{The predicted locations of lease roads, tank batteries, pipelines, and electrical lines.}$

Conservation Division Finney State Office Building 130 S. Market, Rm. 2078 Wichita, KS 67202-3802



Phone: 316-337-6200 Fax: 316-337-6211 http://kcc.ks.gov/

Sam Brownback, Governor

Mark Sievers, Chairman Thomas E. Wright, Commissioner Shari Feist Albrecht, Commissioner

## NOTICE TO OPERATORS FILING INTENT TO DRILL FOR DISPOSAL OR ENHANCED RECOVERY INJECTION WELLS, (CLASS II INJECTION WELL)

The attached approved Notice of Intent to Drill indicates the proposed well is to be used for injection. An approved "Intent to Drill" does not approve injection authority as a Class II Injection Well in Kansas.

Before any well is used for injection purposes, the operator must file an application for injection authority in accordance with K.A.R. 82-3-401 and provide notice in accordance with K.A.R. 82-3-402. The Conservation Division must issue a written permit granting the application before commencement of injection.

The Conservation Division requirements and restrictions associated with Class II Injection are identified in K.A.R. 82-3-400 et seq of our regulations. Associated regulations governing drilling, completion and injection applications may be found in K.A.R. 82-3-135, Table I, Table II, in the Cedar Hills Sandstone Moratorium, (Docket #156,397-C), and the Eastern Kansas Surface Casing Order, (Docket #133,891-C).

If you have questions regarding the approval of injection authority, an injection application may be filed as a "Design Approval" before actual drilling and completion of the well occurs. If you have any questions or concerns regarding Class II injection wells or regulations, call the Underground Injection Control Department at 316-337-6200.

Failure to obtain commission approval before beginning injection is punishable by a penalty, shut-in of the well or both.

STATE OF KANSAS STATE CORPORATION COMMISSION 200 Colorado Derby Building Wichita, Kansas 67202	WELL PLUGGING RECORD  K.A.R82-3-117  /5-05/-01704-00		DOL LEASE N	TOO OLD BER DRLD 2-5-60 AME MEIER		
	TYPE OR PRINT NOTICE: Fill out completely and return to Cons. Div. office within 30 days.		WELL NU	MBER 2		
				Ft. from S Section Line		
			3630	3630 Ft. from E Section Line		
LEASE OPERATOR R P NIXON OPERA	SE OPERATOR R P NIXON OPERATIONS INC		sec. <u>17</u>	SEC.17 TWP. 14 RGE.19 XXXXXX(W)		
ADDRESS 207 W 12TH, HAYS	KS 67601		COUNTY	ELLIS		
PHONE#(913 628-3834 OPERATORS			Date We	II Completed		
Character of Well OIL	** 21		Pluggin	Plugging Commenced 12-27-89		
(Oil, Gas, D&A, SWD, Input, Water	Supply Well)		Pluggin	g Completed 12-27-89		
The plugging proposal was approved						
by MARION SCHMIDT,				C District Agent's Name).		
Is ACO-1 filed? TOO OLD If not						
Producing Formation ARBUCKLE						
Show depth and thickness of all wa	ter, oil and	gas formatio	ons.			
OIL, GAS OR WATER RECORDS		C/	ASING RECO	RD		
Formation Content	From To	Size	Put in	Pulled out		
SURFACE		0 8 5/8		NONE		
PRODUCTION	SURF 38	18 5 1/2"	3818	_NONE.		
Describe in detail 'the manner in w	high the wall	H26 B!H662	Indianti	Ing whome the mud fluid was		
placed and the method or methods	used in intro	ducing it in	ito the hol	le. If cement or other plugs		
were used, state the character TUBING AT 3800', cemented wi	of same and th 100 sx 6	depth place 5/35 POZMI	od, from X 6% GEL	_feet tofeet each set. W/1001bs_hullspulled		
tubing to 2300', cemented wi	th approx 2	45  sx  65/3	5 POZMIX	6% GEL W/2501bs hulls.		
Cement did circulate to surf 30 sx 65/35 POZMIX, 6% GEL,	ace Pulle	d tubing of	ut of ho	le cemented with		
(If additional descript	ion is necess	ary, use BAC	K of this	form.)		
Name of Plugging Contractor JAY-	LAN CORPORA	TION		.Icense No. 5128		
Address 207 W 12TH, HAYS KS	67601			STATE CORRECTIVED		
NAME OF PARTY RESPONSIBLE FOR PLUG	GING FEES: R	P NIXON C	PERATION	S INC		
STATE OF KANSAS	COUNTY OF	ELLIS		,ss. 10 1990		
DAN A NIXON		( E	mployee of	Operator) or (Operator) of		
above-described well, being first		oath, says:	That I ha	ve knowledge of the facts,		
statements, and matters herein conthe same are true and correct, so				described well as filed that		
		(Signature)	/ Xh	espery		

Name of Plugging Contractor JAY-LAN CORPORA	TION License No. 5128
Address 207 W 12TH, HAYS KS 67601	STATE STATE STATE
NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: _R	P NIXON OPERATIONS INC
STATE OF KANSAS COUNTY OF	ELLIS ,ss. JAN 1 0 1990
DAN A NIXON	(Employee of Operator) or (Operator) of
	oath, says: That ! have knowledge of the facts, the log of the above-described well as filed that (Signature) (Signature) (Address) 207 W 12TH, HAYS KS 67601
STATE OF KANSAS  MY APPT. EXPIRES OS PES BELL AND SWORN TO before	me this 8TH day of JANUARY, 19 90  Notary Public
My Commission Expires: $6-19$	-92 Lorna M Herrman Form CP-4 Revised 05-88