

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

1154284

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
DPERATOR: License#	feet from N / S Line of Section
Name:	feet from E / W Line of Section
ddress 1:	Is SECTION: Regular Irregular?
ddress 2:	(Note: Locate well on the Section Plat on reverse side)
State:	County:
Contact Person:	Lease Name: Well #:
hone:	Field Name:
CONTRACTOR: License#	Is this a Prorated / Spaced Field?
lame:	Target Formation(s):
Well Drilled For: Well Class: Type Equipment:	Nearest Lease or unit boundary line (in footage):
Oil Enh Rec Infield Mud Rotary	Ground Surface Elevation:feet MS
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:
If OWWO: old well information as follows:	Surface Pipe by Alternate: I II
<u> </u>	Length of Surface Pipe Planned to be set: Length of Conductor Pipe (if any):
Operator:	Projected Total Depth:
Well Name: Original Total Depth:	Formation at Total Depth:
Original Completion Date Original Total Deptil	Water Source for Drilling Operations:
Directional, Deviated or Horizontal wellbore?	Well Farm Pond Other:
f Yes, true vertical depth:	DWR Permit #:
Bottom Hole Location:	(Note : Apply for Permit with DWR)
(CC DKT #:	Will Cores be taken?
	If Yes, proposed zone:
AFF	If Yes, proposed zone:
	IDAVIT
The undersigned hereby affirms that the drilling, completion and eventual plu	IDAVIT
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The undersigned hereby affirms that the drilling, completion and eventual plu	FIDAVIT gging of this well will comply with K.S.A. 55 et. seq.
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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:
_ease:	feet from N / S Line of Section
Vell Number:	feet from E / W Line of Section
Field:	Sec Twp S. R
Number of Acres attributable to well:	is section. ixequial of integuial
	If Section is Irregular, locate well from nearest corner boundary.
	Section corner used: NE NW SE SW
	DLAT
Chandaration of the well. Chan feetens to the ma	PLAT
=	arest lease or unit boundary line. Show the predicted locations of as required by the Kansas Surface Owner Notice Act (House Bill 2032).
iou may ama	ch a separate plat if desired. 200 ft.
	180 ft.
	LEGEND
	·
	: : O Well Location
	Tank Battery Location
	· · · · · · · · · · · · · · · · · · ·
	Electric Line Location
	Lease Road Location
	EXAMPLE
30	
	·· , ······ , ······
	SEWARD CO. 3390' FEL

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: (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

1154284 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 continue prit 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? Yes No Artificial Liner? Yes No		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	
If the pit is lined give a brief description of the li material, thickness and installation procedure.	om ground level to dee	Describe proce	dures for periodic maintenance and determining 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: Producing Formation: Number of producing wells on lease: Barrels of fluid produced daily: Does the slope from the tank battery allow all s flow into the pit? Yes No Submitted Electronically		Type of materia Number of work Abandonment p Drill pits must b	over and Haul-Off Pits ONLY: all utilized in drilling/workover: king pits to be utilized: procedure: de closed within 365 days of spud date.	
	KCC	OFFICE USE O	NLY	
Date Received: Permit Num	ber:		Liner Steel Pit RFAC RFAS t Date: Lease Inspection: Yes No	



1154284

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 (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:+	3 · · · · · · · · · · · · · · · · · · ·		
Contact Person:	the lease below:		
Phone: () Fax: ()			
Email Address:			
Surface Owner Information:			
Name: When filing a Form T-1 involving multiple surface owners			
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 k batteries, pipelines, and electrical lines. The locations shown on the plat n the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.		
☐ 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 to CP-1 that I am filing in connection with this form; 2) if the form to form; and 3) my operator name, address, phone number, fax, at ☐ I have not provided this information to the surface owner(s). I at KCC will be required to send this information to the surface owner(s).	cknowledge that, because I have not provided this information, the vner(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			

ORAYIN BY: MTK 2225 W. OKLAHOMA AVE. LINN OPERATING INC. EQUAL ROYALTY #4 ATU-76 LINN APPROVED BY: JDK ULYSSES KANSAS 67880 200' FNL Mapping SCALE: 1" = 200" Energy PH.: (620)356-6940 180' FEL 2330 B LAKEVIEW DRIVE AMARILLO, TEXAS 79109 PH:(808)418-5253 NE/4 OF NE/4 OF NE/4 OF NE/4 OF SECTION 30, FAX: (620)356-6950 DATE:7/13/13 T-26-S, R-38-W, KEARNY COUNTY, KANSAS LATITUDE: 37°45'53.65623" N T-26-S, R-38-WLONGITUDE: 101°30'35.15462" W **GROUND ELEVATION: 3271.5°** KEARNY COUNTY, KANSAS 601 SW/4SE/4SEC 20 SEC 19 SET KCAP 60' ROAD 30 (GRADED) SECTION LINE PROPOSED PIPELINE > PAD ACCESS ROAD 200' NE/4 SEC 30 180' NW /4 LINN OPERATING INC. SEC 29 EQUAL ROYALTY #4 ATU-76 DATUM NAD 27 LAT. 37°45'53.65623" LON. 101°30'35.15462" KEARNY COUNTY, KANSAS NOTES: AND TIES SHOWN ARE FROM LINES OF OCCUPATION WHICH MAY NOT BE ACTUAL PROPERTY LIMES. 2) CONTRACTOR TO CONTACT ONE-CALL FOR FOREIGN LITLITY LOCATIONS PRIOR TO ANY EXCAVATION OR CONSTRUCTION.

3) NAD 27 LAT-LONG

JOHN DAVID KELLER, L.S. NO. 1518

PLAT AND CERTIFICATION OF ACREAGE ATTRIBUTABLE TO A GAS WELL

Kansas Corporation Commission, Conservation Division Finney State Office Building, 130 South Market, Room 2078 Wichita, Kansas 67202

API NUMBER 15	LOCATION OF WELL: COUNTY Kearny	
OPERATOR Linn Operating, Inc.		
LEASE Equal Royalty	200 N feet from south/north line of section	
WELL NUMBER 4 ATU-76	180 E feet from east / west line of section	
FIELD Hugoton-Panoma	SECTION 30 TWP 26 (S) RG 38W E/W	
640		
NUMBER OF ACRES ATTRIBUTABLE TO WELL 640 OTR OTR OF ACREAGE NE NE NE	IS SECTION X REGULAR OF IRREGULAR IF SECTION IS IRREGULAR, LOCATE WELL FROM	
QTR/QTR/QTR OF ACREAGE NE NE NE	NEAREST CORNER BOUNDARY. (check line below)	
	Section corner used: NE NW SE SW	
Acher the legation of the well and shade aftr	ibutable acreage for prorated or spaced wells).	
(Show the footage to the mearest lease or uni	t boundary line; and show footage to the nearest	
common source supply well).		
	•	
	· Me attamed	
	: Su attained	
	· at	
	:	
	EXAMPLE .	
	.	
	. 1980	
	· · ·	
	. 10	
	. 3390'	
	• • • • • • • • • • • • • • •	
	•••• • • • • • • • • • • • • • • • • • •	
	• • • •	
• • • • • • • • • • • • • • • • • • • •	seward co.	
The undersigned hereby certifies as R	equlatory Compliance Advisor (title) for	
Linn Operating, Inc.	(Co.), a duly authorized agent, that all	
information shown hereon is true and correct	to the best of my knowledge and belief, that all	
acreage claimed attributable to the well na	med herein is held by production from that well	
and hereby make application for an allowabl	e to be assigned to the well upon the filing of	
this form and the State test, whichever is		
Sign	ature Mans Hierrory	
Sign	acut	
Subscribed and sworn to before me on this	9th day of August , 19 2013	
SUBBLITHER SHALL CO DETOLE WE ON CHIPS	D) 1 /2	
The second second	LIANCE POTOYC	
MINDY POTOR	Notary Public	
My Commission expises) Notary Public, State of Texas	FORM CG-8 (12/94)	
Commission Expires 02-19-2017 S		
Construction of the Constr		

