

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

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1155643

Form C-1

March 2010

Form must be Typed

Form must be Signed

All blanks must be Filled

NOTICE OF INTENT TO DRILL

	e (5) days prior to commencing well Surface Owner Notification Act, MUST be submitted with this form.			
Expected Spud Date:	Spot Description:			
month day year				
	(9/9/9/9)			
OPERATOR: License#	feet from N / S Line of Section feet from E / W Line of Section			
Name:	Is SECTION: Regular Irregular?			
Address 1:	is SECTION Regular Irregular !			
Address 2: State: Zip: +	(Note: Locate well on the Section Plat on reverse side)			
Contact Person:	County:			
Phone:	Lease Name: Well #:			
	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):			
Oil Enh Rec Infield Mud Rotary	Ground Surface Elevation:feet MSL			
Gas Storage Pool Ext. Air Rotary	Water well within one-quarter mile:			
Disposal Wildcat Cable	Public water supply well within one mile: Yes No			
Seismic ; # of Holes Other	Depth to bottom of fresh water:			
Other:	Depth to bottom of usable water:			
	Surface Pipe by Alternate: I II			
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? Yes No			
	If Yes, proposed zone:			
٨٥	FIDAVIT			
The undersigned hereby affirms that the drilling, completion and eventual plu				
It is agreed that the following minimum requirements will be met:	agging of this well will comply with N.O.A. 55 ct. 564.			
Notify the appropriate district office <i>prior</i> to spudding of well;	1.90			
 A copy of the approved notice of intent to drill shall be posted on each 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				
	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	e plugged. In all cases, NOTIFY district office prior to any cementing.			
5 1 - '4 1 - 1 - ' 1				
Submitted Electronically				
- 2222	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;			
Conductor pipe requiredfeet	- File Drill Pit Application (form CDP-1) with Intent to Drill;			
Minimum surface pipe requiredfeet per ALT.	- File Completion Form ACO-1 within 120 days of spud date;			
	- File acreage attribution plat according to field proration orders;			
Approved by:	 Notify appropriate district office 48 hours prior to workover or re-entry; Submit plugging report (CP-4) after plugging is completed (within 60 days); 			
This authorization expires:	- Obtain written approval before disposing or injecting salt water.			
(This authorization void if drilling not started within 12 months of approval date.)				

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

Spud date: _

- 1	well will not be drilled of permit has expired (See. authorized expiration date)
p	please check the box below and return to the address below.
Г	

Well will not be drilled or Permit Expired	Date:
Signature of Operator or Agent:	



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.

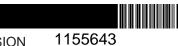
Operator: _							_ LO	cation of vvei	ii: County:		
Lease:							_		feet from N / S Line of Section		
Well Numb	er:						_		feet from E / W Line of Section		
Well Number:							Se	Sec Twp S. R			
Number of QTR/QTR/							15 (Section:	Regular or Irregular		
							If S	Section is Irr	regular, locate well from nearest corner boundary. used: NE NW SE SW		
	lease roa				d electrica	the neare I lines, as	required b		ary line. Show the predicted locations of s Surface Owner Notice Act (House Bill 2032). ed.		
						:			LEGEND		
330 ft									O Well Location Tank Battery Location Pipeline Location Electric Line Location Lease Road Location		
300 II.		: :	: :	<u>:</u> :		<u>:</u> :	:	:	EXAMPLE		
		 :		2	3						
		: : : :	: :	: : : :			: 		1980' FSL		
		: :	: :	i							
		:	:	:		:	:	:	SEWARD CO. 3390' FEL		

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.

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).
- 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: Emergency Pit Burn Pit Settling Pit Drilling Pit Workover Pit Haul-Off Pit (If WP Supply API No. or Year Drilled)	Pit is: Proposed Existing If Existing, date constructed: Pit capacity:		SecTwp R East WestFeet from North / South Line of SectionFeet from East / West Line of Section		
		(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?	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		
If the pit is lined give a brief description of the li material, thickness and installation procedure.			dures for periodic maintenance and determining ncluding 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:		Drilling, Work	over and Haul-Off Pits ONLY:		
Producing Formation:		Type of materia	al utilized in drilling/workover:		
Number of producing wells on lease:		Number of wor	king pits to be utilized:		
Barrels of fluid produced daily:		Abandonment	procedure:		
Does the slope from the tank battery allow all s flow into the pit? Yes No	spilled fluids to	Drill pits must b	be closed within 365 days of spud date.		
Submitted Electronically					
	KCC	OFFICE USE O			
Date Received: Permit Num	ber:	Permi	Liner Steel Pit RFAC RFAS it Date: Lease Inspection: Yes No		



1155643

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:	Sec. Twp. S. R. East West				
Address 1:					
Address 2:	Lease Name: Well #:				
City: State: Zip:+	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 county, and in the real estate property tax records of the county treasurer.				
Address 2:					
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 in 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					



Fall & Associates

Stake and Elevation Service 719 W. 5" Street P.G. Box 404 Concertia, US. G6901 1-809-536-2821

Date 8-12-13 0807131

