

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

1156615

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:	( <b>Note</b> : 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	

Operator: \_

#### 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.

Location of Well: County: \_\_\_

Lease:								feet from	N /	S Line	of Section
Well Numb	er:							feet from	E /	W Line	of Section
Field:					Sec		Twp	S. R		_ E	W
					13 0	ection:	Regular or	Irregul	ar		
QINQIN	QINQIN 01 a	creage				ootion is l	rregular, locat	a wall from	noorost oo	nor boun	dom
						tion corne			SE S		uai y.
					PLAT						
	Show	location of the	well. Show foots	age to the near		unit bound	lary line. Show	the predicted	d locations o	of	
			pipelines and ele	ectrical lines, a	s required by	the Kans	as Surface Owr				
			550 ft.	You may attach	a separate į	olat if desi	red.				
	:	:	:	:	: :						
1820 ft								LEC	SEND		
1020 II		······································	ソ		:			O Well	Location		
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	:	:	:	:	: :						
		•		:			SEWARI	<b>CO.</b> 3390' F	EL		

#### 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

1156615 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 shallowest fresh water feet. Source of information:				
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 material utilized in drilling/workover:				
Number of producing wells on lease:		Number of working 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 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			



1156615

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:	SecTwpS. R East				
Address 1:	County:				
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				
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					



# 

Stake and Flowation Service 718 M. 5" Street P.O. Box 404 Concernia, KS. 66901 1.808-536-2521

Date 8-12-13

Invoice Number Brown MURFIN DRILLING 1-30 Farm Name Number Operator 550'FNL 1820'FWL 45 30 30w Rawlins-KS Location 13 County-State Education 2835 Gr. Murfin Drilling 250 N. Water Ordered By: Shauna Suite 300 Wichita, KS. 67202 Sexta 1" Hours" 1820 Stake \ 6' wood stake on slight to moderate slope corn stalks 15' SE of terrace top.

