

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

1157085

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	
OPERATOR: License#	(0/0/0/0) feet from N / S Line of Section
lame:	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)
City: State: Zip: +	County:
contact Person:	Lease Name: Well #:
hone:	Field Name:
ONTRACTOR: 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):
	Ground Surface Elevation:feet MSI
Oil Enh Rec Infield Mud Rotary	Water well within one-quarter mile:
Gas Storage Pool Ext. Air Rotary 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 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:
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	IDAVIT
he undersigned hereby affirms that the drilling, completion and eventual plug	gging of this well will comply with K.S.A. 55 et. seq.
	gging of this well will comply with K.S.A. 55 et. seq.
The undersigned hereby affirms that the drilling, completion and eventual plust is agreed that the following minimum requirements will be met: 1. Notify the appropriate district office prior to soudding of well:	gging of this well will comply with K.S.A. 55 et. seq.
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Side Two



For KCC Use ONLY	
API # 15	_

IN ALL CASES PLOT THE INTENDED WELL ON THE PLAT BELOW

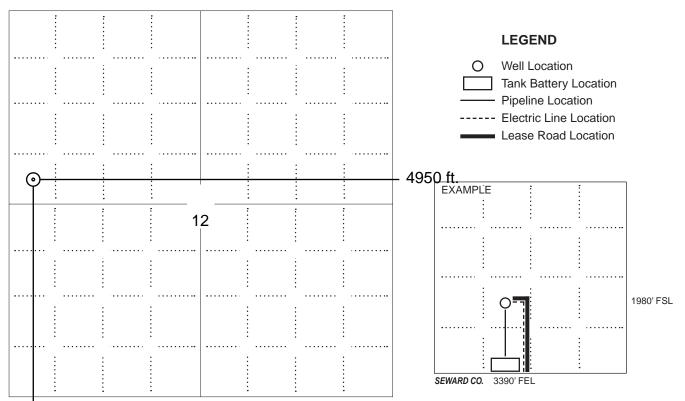
In all cases, please fully complete this side of the form. Include items 1 through 5 at the bottom of this page.

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 🗌 E 🔲 W
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.

2970 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

1157085 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 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 Number:		Permi	Liner Steel Pit RFAC RFAS it Date: Lease Inspection: Yes No		



1157085

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.

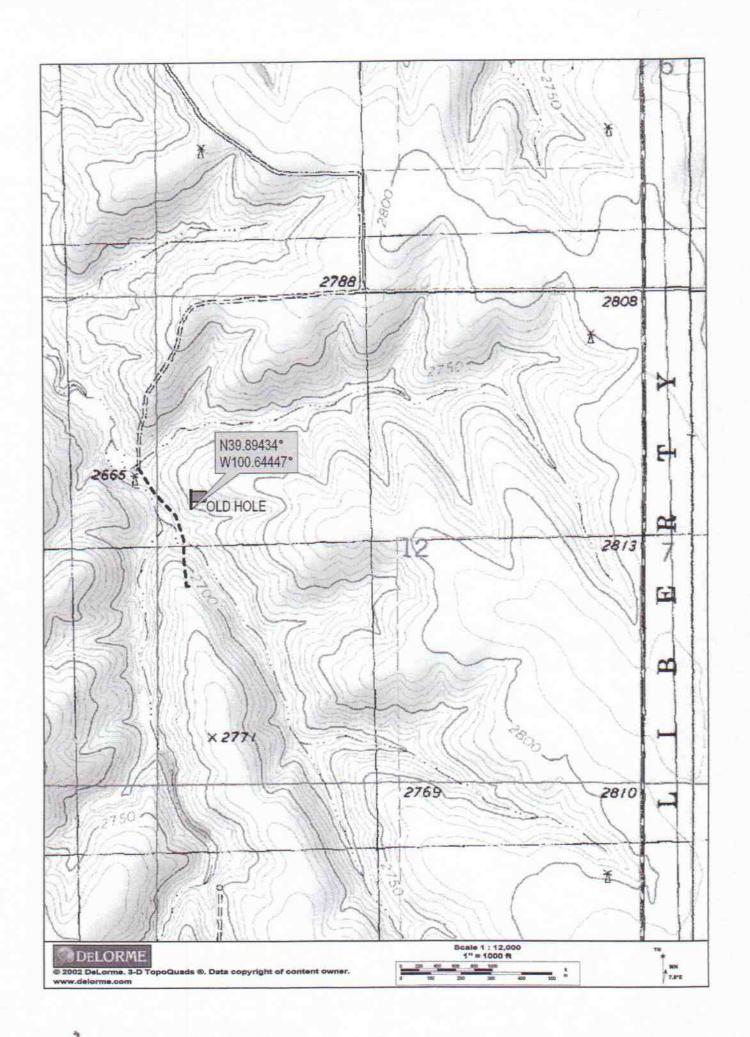
Select the corresponding form being filed: C-1 (Intent) CB-1 (CB-1)	Cathodic Protection Borehole Intent) T-1 (Transfer) CP-1 (Plugging Application)			
OPERATOR: License #	Well Location:			
Name:	SecTwpS. R East			
Address 1:	County:			
Address 2:	Lease Name: Well #:			
City:	If filing a Form T-1 for 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 additiona			
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:	accepts, and in the weel estate property toy records of the accepts tracely re-			
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.O. Box 404 Concordia, KS. 66901 1-800-536-2921

		1-8	80-536-2921		Date 8-29-13	
					Invoice Number 0828131	
CHOLLA PRODUCTION ~	3	3-12		J Kyte OV	wwo	
Operator	Number			Farm Nan		
Daniel VC	12	25	30w	SW SW NW		
Decatur-KS County-State	S	T	R	Location		
Cholla Production, LLC 10390 Bradford RD. Suite 201 Littleton, CO. 80127					Elevation 2690 GL Ordered By: Bill	
			Scale 1"=1600"		l I	
2330'+ Stake			12	g on old drill pad.		



STATE OF KANSAS WELL PLUGGING RECORD STATE CORPORATION COMMISSION K.A.R.-82-3-117

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API	NUMBER 15-039-20,828-00-0
•	

TATE CORPORATION		V. V. K.	-02-3-	- 1 1 7	YE ! HOM	J.C.
00 Colorado Derby Ichita, Kansas					LEASE N	AMEMines
		TYPE O				MBER #2
	an	CE: Fill (d return	to C	ons. Div.	2970 '	_ Ft. from S Section Line
: .	Ó	ffice wit	hin 30) days.	4950 '	_ Ft. from E Section Line
EASE OPERATOR Oil	l Producers, Inc.	of Kansas			SEC. 12	TWP. 2S RGE. 30 (E)or (W)
DDRESS P.O. Box	8647, Wichita, K	ansas 672	08		COUNTY	Decatur
HONE#(316) 681-02	231 OPERATORS.	LICENSE NO	08	061	Date We	II Completed 6-9-88
haracter of Well	D & A				Pluggin	g Commenced 6-9-88
Oll, Gas, D&A, St	WD, Input, Water S	upply Wel	1)		Pluggin	g Completed 6-9-88
he plugging prop	osal was approved	on	June	5 , 1988		(date)
y Gib Balth	•					C District Agent's Name).
s ACO-1 filed?	if not,	is well	log a	ttached?		Carly Mountains
roducina Formatio	on	Depth	to To	 DD	Bott	om T.D
	ickness of all wat					SEP 27 508 8
OIL, GAS OR WATE			g		ASING RECO	
Formation	Content	From	То	Size	Put in	Pulled out
	Surface Pipe	0	252	8 5/8	6 jts.	N/A
laced and the m	ethod or methods u	sed in in	trodu	cing it i	nto the ho	ing where the mud fluid wide. If cement or other pluing feet tofeet each se
	1770 ' 100sks, 260 60/40poz 6%gel 3%c					s rat hole
(If ad	ditional descripti	on is nec	essar	y, use BA	CK of this	form.)
ame of Plugging	Contractor Wester	n Kansas	Drill:	ing. Inc.		License No. 4083
	x 126, Hays, Kans					
TATE OF	C	OUNTY OF				,55.
		•		/ Em	nloves of	Operator) or (Operator)
tatements, and m	atters herein cont and correct, so h	ained and	the	oath, say	s: That I	have knowledge of the fac- scribed well as filed th
	WO STA	TARY PUBLIC TE OF KANSAS Exp.	()	Address)		
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			<u> </u>	1000	reugh L	ary Public
1	My Commission Expi	res: /c	2/19	1188		•



Fall & Associates

Stake and Elevation Service 719 W. 5th Street P.O. Box 404 Concordia, KS. 66901 1-800-536-2821

Date 8/29/2013

Invoice Number J. Kyte 3-12 CHOLLA PRODUCTION, LLC Number Farm Name Operator Decatur Co. - KS 12 **2S** 30W 2310 FNL 330 FWL County-State Location Elevation 2699 est Gr. **Cholla Production, LLC** 10390 Bradford Road Ordered By: Bill Suite 201 Littleton, CO 80127 Scale 1"=1000" Proposed tank battery Proposed lease road, electric and flowlines 330 FWL Location of Oil Producers Mines 2 - our re-entry will be named the J. Kyte 3-12 Note: Old well will be located and staked in open field ~9/2/2013 by Fall & Associates. GL is estimate only from KCC website.