

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

1158029

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 E V		
OPERATOR: License#	(Q/Q/Q/Q) 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):		
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		
LITE CANANCE. OID WEIL ITHOTTHATION AS TOHOWS.	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:		
Directional, Deviated or Horizontal wellbore?	Water Source for Drilling Operations:		
f Yes, true vertical depth:	Well Farm Pond Other:		
Bottom Hole Location:	DWR Permit #:(Note: Apply for Permit with DWR)		
	Will Cores be taken?		
CCC DKT #:	Will Cores be taken? If Yes, proposed zone:		
CCC DKT #:AFI	Will Cores be taken? Yes Yes Yes If Yes, proposed zone:		
AFI The undersigned hereby affirms that the drilling, completion and eventual plu	Will Cores be taken? Yes Yes If Yes, proposed zone:		
CCC DKT #:	Will Cores be taken? If Yes, proposed zone: **IDAVIT*		
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SEWARD CO. 3390' FEL

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 W	/eii: County:		
Lease:								feet	et from N /	S Line of Section
Well Numb	er:							fee	et from E /	W Line of Section
Field:					Sec Twp S. R					
							Is Section:	Regular or	Irregular	
QTR/QTR/	QTR/QTR	of acreag	e:							
							If Section is	Irregular, locate well	I from nearest corn	er boundary.
							Section corne	er used: NE	NW SE SW	1
						PL				
								dary line. Show the pr		,
	lease roa	ds, tank b	atteries, p	ipelines and			-	as Surface Owner No	otice Act (House Bill 2	2032).
			2	2100 ft.	You may a	апасна ѕер	parate plat if desi	irea.		
		:	:	:	:	:	:			
		:		:	:		:		LEGEND	
						• • • • • • • • • • • • • • • • • • • •	•			
		:		:	:	:	:	0	Well Location	
		:	:	:					Tank Battery Loc	
	•••••								Pipeline Location	
		:	:	:	:	:			- Electric Line Loc	
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1850 ft	•••••	:	 6):	:	:	:			
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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

1158029 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 co Pit capacity:	Existing nstructed:	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 ONLY					
Date Received: Permit Num	ber:	Permi	Liner Steel Pit RFAC RFAS it Date: Lease Inspection: Yes No		



KANSAS CORPORATION COMMISSION 1158029 OIL & GAS CONSERVATION DIVISION

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	(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			
Address 1:	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, 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				
	_			

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	n. Include items 1 through 5 at the bottom of this page.			
Operator: Edison Operating Company, LLC	Location of Well: County: Stafford			
Lease: Rixon	2,300 feet from N / S Line of Section			
Well Number: 1-16	2,000 feet from E / W Line of Section Sec. 16 Twp. 24 S. R. 13 E W			
Field: Wildcat				
Number of Acres attributable to well: 480	Is Section: X Regular or Irregular			
QTR/QTR/QTR/QTR of acreage: SE - SE - NW				
	If Section is Irregular, locate well from nearest corner boundary. Section corner used: NE NW SE SW			
	.AT pase or unit boundary line. Show the predicted locations of			
lease roads, tank batteries, pipelines and electrical lines, as requ You may attach a se	uired by the Kansas Surface Owner Notice Act (House Bill 2032). parate plat if desired.			
13W				
	LEGEND			
7	O Well Location Tank Battery Location Pipeline Location			
7300	Electric Line Location Lease Road Location			
6	EXAMPLE : :			
2000 FWL 16	24S LANNII EL			
	1980' FSL			
	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.

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

December 03, 2013

David Withrow Edison Operating Company LLC 8100 E. 22ND ST. N., BLDG 1900 WICHITA, KS 67226

Re: Drilling Pit Application Rixon 1-16 NW/4 Sec.16-24S-13W Stafford County, Kansas

Dear David Withrow:

District staff has inspected the above referenced location and has determined that the reserve pit shall be constructed <u>without slots</u>, the bottom shall be flat and reasonably level and the free fluids must be removed. The fluids are to be removed from the reserve pit as soon as the Hutchinson Salt section has been drilled through and displacement of the fluids into the reserve pit has occurred. The fluids should be removed again within 96 hours after drilling operations have ceased.

If production casing is set all completion fluids shall be removed from the working pits daily. NO completion fluids or non-exempt wastes shall be placed in the reserve pit.

The fluids should be taken to an authorized disposal well. Please call the District Office at (620) 225-8888 when the fluids have been removed. Please file form CDP-5 (August 2008), Exploration and Production Waste Transfer, through KOLAR within 30 days of fluid removal.

A copy of this letter should be posted in the doghouse along with the approved Intent to Drill. If you have any questions or concerns please feel free to contact the District Office at (620) 225-8888.