

please check the box below and return to the address below.

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

Form C-1 March 2010 Form must be Typed Form must be Signed All blanks must be Filled

NOTICE OF INTENT TO DRILL

•	Surface Owner Notification Act, MUST be submitted with this form.
Expected Spud Date:	Spot Description:
o.a udy you.	Sec Twp S. R E
OPERATOR: License#	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:	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):
	Ground Surface Elevation:feet MSL
Oil Enh Rec Infield Mud Rotary Gas Storage Pool Ext. Air 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 III
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?
	If Yes, proposed zone:
A E.	EIDAV/IT
	FIDAVIT
The undersigned hereby affirms that the drilling, completion and eventual plu	agging of this well will comply with K.S.A. 55 et. seq.
It is agreed that the following minimum requirements will be met:	
 Notify the appropriate district office <i>prior</i> to spudding of well; 	
2. A copy of the approved notice of intent to drill shall be posted on each	9 ° 5'
The minimum amount of surface pipe as specified below shall be set through all unconsolidated materials plus a minimum of 20 feet into th	
4. If the well is dry hole, an agreement between the operator and the dis	
5. The appropriate district office will be notified before well is either plugg	, , , , , , , , , , , , , , , , , , , ,
6. If an ALTERNATE II COMPLETION, production pipe shall be cemente	d from below any usable water to surface within 120 DAYS of spud date.
• • • • • • • • • • • • • • • • • • • •	133,891-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.
ubmitted Electronically	
For KCC Hos ONLY	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; Notify appropriate district office 48 hours prior to workover or re-entry;
Approved by:	- Notify appropriate district office 46 flours prior to workover of 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.)	- Oblain Willen approval before disposing or infecting sail water.

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

Spud date: _



For KCC Use ONLY	
API # 15	

IN ALL CASES PLOT THE INTENDED WELL ON THE PLAT BELOW

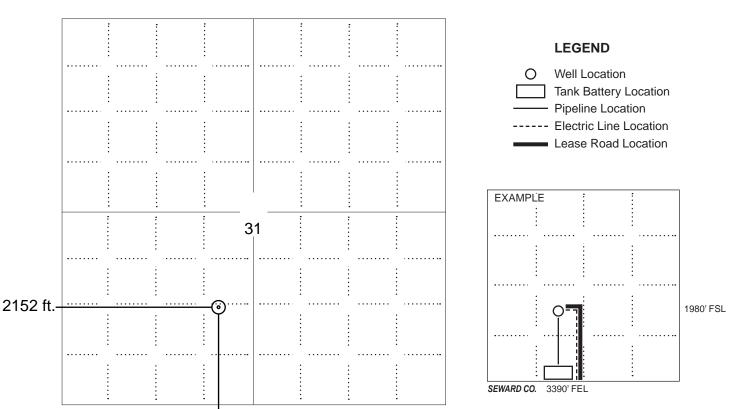
In all cases, please fully complete this side of the form. Include items 1 through 5 at the bottom of this page.

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
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.

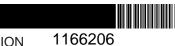


NOTE: In all cases locate the spot of the proposed drilling locaton.

1335 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

6 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 coll Pit capacity:	Existing nstructed: (bbls)	Sec. Twp. R. East West Feet from North / South Line of Section Feet from East / West Line of Section County
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?	Artificial Liner?	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
Depth fro	om ground level to dee	epest point:	(feet) No Pit
Distance to account water well within one or its	d with	Dooth to abollo	
Distance to nearest water well within one-mile of	or pit:	Source of inforr	west fresh water feet. nation:
feet Depth of water well	feet	measured	well owner electric log KDWR
Producing Formation: Type of n Number of producing wells on lease: Number Barrels of fluid produced daily: Abandon		Type of materia	ver and Haul-Off Pits ONLY: I utilized in drilling/workover: king pits to be utilized: procedure:
		·	e closed within 365 days of spud date.
Submitted Electronically			
KCC OFFICE USE ONLY Liner Steel Pit RFAC RFAS			
Date Received: Permit Num	ber:	Permi	t Date: Lease Inspection: Yes No



1166206

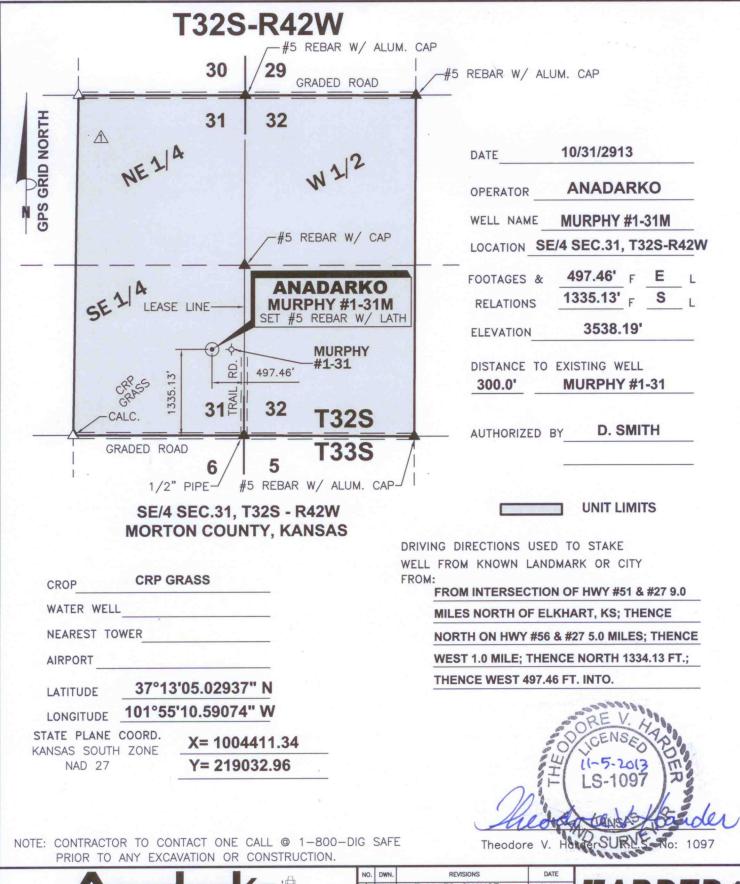
Form KSONA-1
July 2010
Form Must Be Typed
Form must be Signed
All blanks must be Filled

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:	•		
Address 2:			
City: State: Zip:+	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:		
Contact Person:			
Phone: () Fax: ()			
Email Address:			
Surface Owner Information:			
Name:	When filing a Form T-1 involving multiple surface owners, attach an addition		
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			



A DRF UNIT LIMITS CHANGE 11/5/2013 **E&P ONSHORE LLC** AND ASSOCIATES LAND SURVEYING - GPS SPECIALISTS WELL LOCATION OF THE MURPHY #1-31M P.O. BOX 518 514 MORTON Elkhart, Kansas 67950 LOCATED IN THE SE/4 SEC.31, T32S-R42W, 10/31/2013 1"=1500" Phone: (620) 697-2696 MORTON COUNTY, KANSAS OK Fax: (620) 697-4175 E-MAIL: tharder@elkhart.com WORK ORDER NO.: AUTHORIZED BY: D. SMITH APPROVED BY: DRAWN BY: DRF CHECKED BY:

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-	00 - 1-
	LOCATION OF WELL: COUNTY Morton
OPERATOR Anadarko E FF ONShore LLC.	335 feet from south/north line of section
WELL NUMBER 3/M	2152 feet from east west line of section
FIELD Greenwood	SECTION 31 TWP 32 (S) RG 42 E/W
NUMBER OF ACRES ATTRIBUTABLE TO WELL 640	IS SECTION REGULAR OF IRREGULAR
QTR/QTR/QTR OF ACREAGE SW -SE -NE	IF SECTION IS IRREGULAR, LOCATE WELL FROM
	NEAREST CORNER BOUNDARY. (check line below)
(character of the well and shade attr	Section corner used: NE NW SE SW ibutable acreage for prorated or spaced wells).
(Show the footage to the nearest lease or unit	t boundary line; and show footage to the nearest
common source supply well).	
	Murphy 1-31m is located 1335 FSL + 2152 FWL of
	1335 FSL 4 2182 FWL OT
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Section 31 T325 R42W.
31	Murphy 1-3 IM is 300 west of non-producing well Murphy 1-3
//3///	of non-producing well Murphy 1-3
	in horepraces y
.,/,/	
	/ ·
- Wi	EXAMPLE .
SE.74 · / · / :	
mwzky 1-3m	1980
Murphy 1-3	· ·
2152'10 497'	
0-9	. 3390'
(y) 300'	<i>,</i>
./	
31 /2	32.
Morton Co.	SEWARD CO.
The undersigned hereby certifies as	egulatory Analyst (title) for
Anadarko Ett Unshire LL	(Co.), a duly authorized agent, that all
information shown hereon is true and correct	to the best of my knowledge and belief, that all med herein is held by production from that well
and hereby make application for an allowable	e to be assigned to the well upon the filing of
this form the State test, whichever is	later.
Sign	ature
Subscript and sworn to before me on this 13	day of <u>Hovember</u> , 19 2013
	Elseld Hollastel
Commission expires 6-15-2015	Notary Public
My Committee on expires 6-15-2015	FORM CG-8 (12/94)
Manual Comments of the Comment	