

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

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1166745

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 ° 0'					
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 48 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: _

If well will not be drilled or permit has expired (See: authorized expiration date) please check the box below and return to the address below.

₩e	ell will not be drilled or Permit Expired	Date:	
Sig	nature of Operator or Agent:		



For KCC Use ONLY	
API # 15	

IN ALL CASES PLOT THE INTENDED WELL ON THE PLAT BELOW

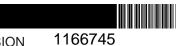
In all cases, please fully complete this side of the form. Include items 1 through 5 at the bottom of this page.

Operator: _							_ Lo	cation of Well	l: County:				
Lease:										feet from	N /	S Line	of Section
Well Number:				_	feet from E / W Line of Section								
				Se	SecTwpS. R E W] w			
Number of A							- IS	Section:	Regular or	Irregula	r		
							Se	Section is Irrection corner u	egular, locate used: NE		earest con		dary.
		ds, tank ba			d electrica	the neare	required b		ry line. Show the Surface Owne				
		:		: : : :		:	:	:		LEG	END		
1025 ft		•				•				Tank Pipeli Electr	Location Battery Locatine Locati	on ocation	
				: :			: 				e Road Lo	ocation	ı
				· 7	,		<u>:</u> :		EXAMF				
				:								,	
										0-7		,	1980' FSL
									SEWARD O	: 3390' FE	L		ı

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

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 Workover Pit Haul-Off Pit (If WP Supply API No. or Year Drilled)	Pit is: Proposed Existing If Existing, date constructed: Pit capacity: (bbls)		SecTwpR East WestFeet from North / South Line of SectionFeet from East / West Line of SectionCounty				
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 nearest water well within one-mile of	of nit-	Donth to challe	west fresh waterfeet.				
Distance to nearest water well within one-fille t	л рп.	Source of inform	nation:				
feet Depth of water well	feet	measured	well owner electric log KDWR				
Emergency, Settling and Burn Pits ONLY: Producing Formation: Number of producing wells on lease: Barrels of fluid produced daily:		Type of materia	ver and Haul-Off Pits ONLY: I utilized in drilling/workover: xing pits to be utilized: procedure:				
Does the slope from the tank battery allow all s flow into the pit? Yes No	pilled fluids to	Drill pits must be 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				



1166745

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 (C	Cathodic Protection Borehole Intent) T-1 (Transfer) CP-1 (Plugging Application)						
OPERATOR: License #	Well Location:						
Name:	SecTwpS. R						
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 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:	county, and in the real estate property tax records of the county treasurer.						
City: State: Zip:+							
the KCC with a plat showing the predicted locations of lease roads, tank	dic Protection Borehole Intent), you must supply the surface owners and 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.						
Select one of the following:							
owner(s) of the land upon which the subject well is or will be loc CP-1 that I am filing in connection with this form; 2) if the form be form; and 3) my operator name, address, phone number, fax, and I have not provided this information to the surface owner(s). I ack KCC will be required to send this information to the surface owner(s).	cknowledge that, because I have not provided this information, the rner(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	_						

Samuel Gary Jr. & Associates, Inc. 1515 Wynkoop Street, Suite 700 **OPERATOR:**

Denver, Colorado 80202 office: 303-831-4673; fax 303-863-7285

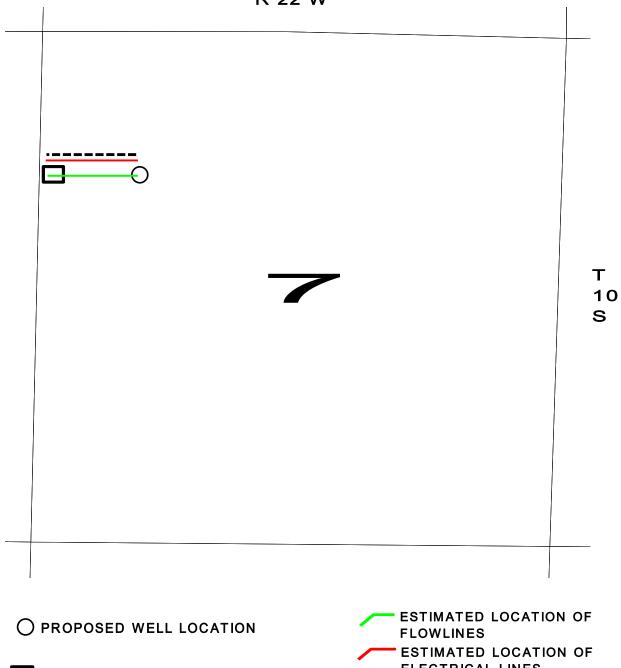
STITES 1-7 WELL NAME:

1500 FNL / 1025 FWL Sec. 7-10S-22W GRAHAM COUNTY LOCATION:

M. Dennis & Janice Stites SURFACE OWNER:

> 516 North 11th Avenue Hill City, KS 67642

> > R 22 W



ELECTRICAL LINES ESTIMATED LOCATION OF TANK ESTIMATED LEASE ROAD BATTERY

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

November 05, 2013

DAN PRITCHARD Samuel Gary Jr. & Associates, Inc. 1515 WYNKOOP, STE 700 DENVER, CO 80202

Re: Drilling Pit Application STITES 1-7 NW/4 Sec.07-10S-22W Graham County, Kansas

Dear DAN PRITCHARD:

District staff has inspected the above referenced location and has determined that the reserve pit shall be constructed **without slots**, 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 practical after drilling operations have ceased. KEEP PITS away from draw/drainage.

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 (785) 625-0550 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 (785) 625-0550.