

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

Expected Spud Date:	month day		Spot Description:
	month day	year	, Sec Twp S. R 🔲 E 🔲 W
OPERATOR: License#			(Q/Q/Q/Q) feet from N / S Line of Section
			feet from E / W Line of Section
			Is SECTION: Regular Irregular?
	State: Zip		(Note: Escale well of the Section Flat of February
	<u> </u>		County
			Lease Name: Well #:
CONTRACTOR II			Field Name:
			is the difference of Spaces Field.
Name:			Target Formation(s):
Well Drilled For:	Well Class:	Type Equipment:	Nearest Lease or unit boundary line (in footage):
Oil Enh F	Rec Infield	Mud Rotary	Ground Surface Elevation:feet MSL
Gas Stora		Air Rotary	Water well within one-quarter mile:
Dispo	<u> </u>	Cable	Public water supply well within one mile:
Seismic : # 6			Depth to bottom of fresh water:
	or ribics 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:
Operatori			
•			Projected Total Depth:
	ate: Original		
Original Completion De	ite Original	Total Deptil.	Water Source for Drilling Operations:
Directional, Deviated or Ho	rizontal wellbore?	Yes No	Well Farm Pond Other:
·			DWK Feithit #
			(Note: Apply for Fernill Will DWT
			If Yes, proposed zone:
			ii les, proposed zone.
		AF	FIDAVIT
The undersigned hereby	affirms that the drilling, co	empletion and eventual p	lugging of this well will comply with K.S.A. 55 et. seq.
t is agreed that the follow	ving minimum requiremen	its will be met:	
1 Notify the appropri	ate district office <i>prior</i> to	enudding of well:	
	oved notice of intent to dri		sh drilling rig:
17 11			t by circulating cement to the top; in all cases surface pipe <b>shall be set</b>
	olidated materials plus a r		
4. If the well is dry ho	le, an agreement between	n the operator and the di	strict office on plug length and placement is necessary prior to plugging;
<ol><li>The appropriate dis</li></ol>	strict office will be notified	before well is either pluç	ged or production casing is cemented in;
			ed 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 spu	ud date or the well shall b	e plugged. In all cases, NOTIFY district office prior to any cementing.
ubmitted Electron	nically		
			Remember to:
For KCC Use ONLY			- File Certification of Compliance with the Kansas Surface Owner Notification
			Act (KSONA-1) with Intent to Drill;
API # 15 -			
API # 15		f	- File Drill Pit Application (form CDP-1) with Intent to Drill;
Conductor pipe required			, , , , , , , , , , , , , , , , , , , ,
Conductor pipe required	quired		<ul> <li>File Drill Pit Application (form CDP-1) with Intent to Drill;</li> <li>File Completion Form ACO-1 within 120 days of spud date;</li> <li>File acreage attribution plat according to field proration orders;</li> </ul>
Conductor pipe required Minimum surface pipe red		_ feet per ALTIII	- File Completion Form ACO-1 within 120 days of spud date;
Conductor pipe required . Minimum surface pipe red Approved by:	quired	_ feet per ALTIII	<ul> <li>File Completion Form ACO-1 within 120 days of spud date;</li> <li>File acreage attribution plat according to field proration orders;</li> </ul>
Conductor pipe required .  Minimum surface pipe red Approved by:	quired	_ feet per ALT I II	<ul> <li>File Completion Form ACO-1 within 120 days of spud date;</li> <li>File acreage attribution plat according to field proration orders;</li> <li>Notify appropriate district office 48 hours prior to workover or re-entry;</li> </ul>

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

Spud date: \_

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 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	Location of Well: County:						
						feet from N / S Line of Section						
Well Number:								feet from E / W Line of Section				
							_ Se	C	Twp S. R 🗌 E 🔲 W			
Number of Acres attributable to well:  QTR/QTR/QTR of acreage:			15	Is Section: Regular or Irregular								
Q III/Q III	/ (	or acreag		_		_		Da atlant la Inn	and a land will form a second assume have done			
								ction corner	regular, locate well from nearest corner boundary.			
							36	Clion comer	useuINEINVVSLSVV			
		ads, tank b			d electrica	l lines, as	required b		ry line. Show the predicted locations of s Surface Owner Notice Act (House Bill 2032). d.			
107 (1		:	:	:		:	:	:				
197 ft.	<del> </del> -©			:		:	:		LEGEND			
				•				•				
		:	:	:		:	:	:	O Well Location			
		:	:	:		:	:	:	Tank Battery Location			
	•••••				•••••				Pipeline Location			
		:	:	:		:	:		Electric Line Location			
		:	:	:		:	:	:	Lease Road Location			
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							:		SEWARD CO 3390/ FET			

#### 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 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:  (bbls)		SecTwp R East WestFeet from North / South Line of SectionFeet 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		
If the pit is lined give a brief description of the li material, thickness and installation procedure.	om ground level to dee	Describe proce	dures for periodic maintenance and determining any special monitoring.		
Distance to nearest water well within one-mile of	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:  Producing Formation:  Number of producing wells on lease:  Barrels of fluid produced daily:  Does the slope from the tank battery allow all s flow into the pit?  Yes No  Submitted Electronically		Type of materia  Number of work  Abandonment p  Drill pits must b	over and Haul-Off Pits ONLY:  all utilized in drilling/workover:  king pits to be utilized:  procedure:  de closed within 365 days of spud date.		
	KCC	OFFICE USE O	NLY		
Date Received: Permit Num	ber:		Liner Steel Pit RFAC RFAS  t Date: Lease Inspection: Yes No		



#### Kansas Corporation Commission Oil & Gas Conservation Division

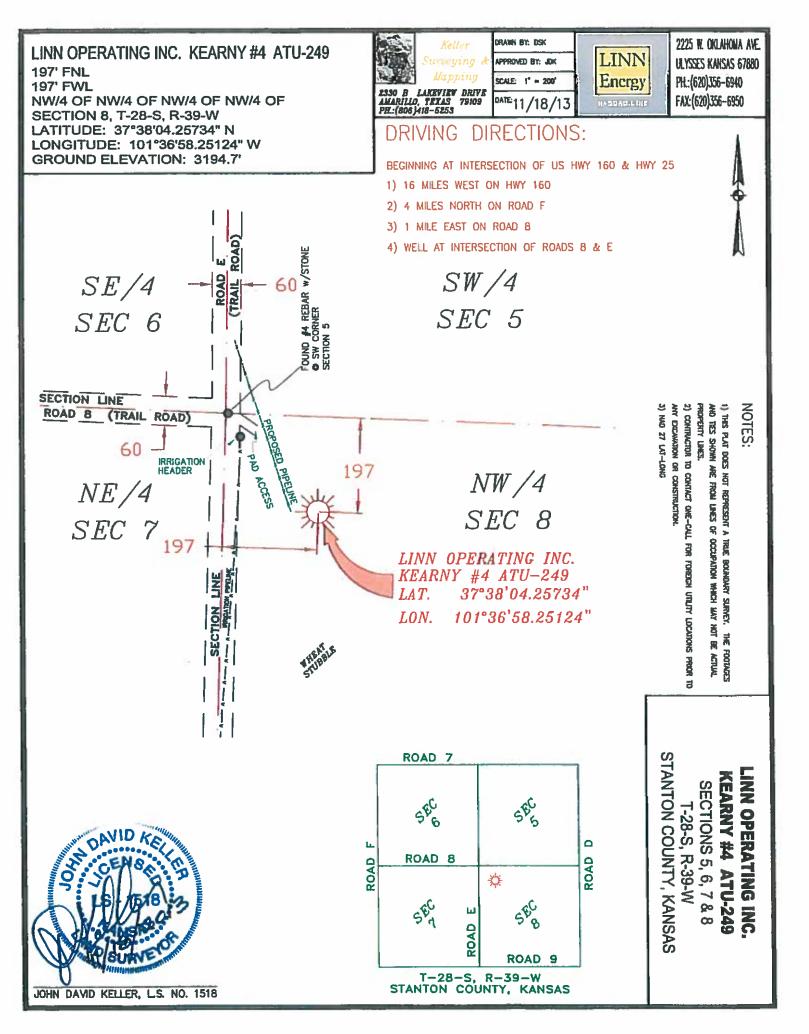
Form KSONA-1
July 2010
Form Must Be Typed
Form must be Signed
All blanks must be Filled

# 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 (C	Cathodic Protection Borehole Intent) T-1 (Transfer) CP-1 (Plugging Application)			
OPERATOR: License #	Well Location:			
Name:	SecTwpS. R 🔲 East 🗌 West			
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 helow:			
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:				
the KCC with a plat showing the predicted locations of lease roads, tank	dic Protection Borehole Intent), you must supply the surface owners and a 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 loce CP-1 that I am filing in connection with this form; 2) if the form the form; and 3) my operator name, address, phone number, fax, and I have not provided this information to the surface owner(s). I an KCC will be required to send this information to the surface owner(s).	cknowledge that, because I have not provided this information, the ner(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				



## 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	LOCATION OF WELL: COUNTY Stanton					
OPERATOR LINN Operating, Inc.						
LEASE Kearny	197 N feet from south/north line of section					
WELL NUMBER 4 ATU-249	197 W feet from east / west line of section					
FIELD Hugoton-Panoma	SECTION 8 TWP 28 (S) RG 39W E/W					
	SECTION 8 TWP 20 (S) RG 39W E/W IS SECTION X REGULAR OF IRREGULAR					
NUMBER OF ACRES ATTRIBUTABLE TO WELL 640	IS SECTION A REGULAR OF TRREGULAR  IF SECTION IS IRREGULAR, LOCATE WELL FROM					
QTR/QTR/QTR OF ACREAGE NW - NW - NW	NEAREST CORNER BOUNDARY. (check line below)					
	Section corner used: NE NW SE SW					
(show the logetion of the well and shade attr	ibutable acreage for prorated or spaced wells).					
(Show the footage to the nearest lease or unit	boundary line; and show footage to the nearest					
common source supply well).	•					
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	EXAMPLE .					
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	SEWARD CO.					
m south a bouch coulding of D	ogulatory Compliance Advisor (title) for					
The muderardued necepy certifies as	equlatory Compliance Advisor (title) for					
LINN Operating, Inc.	(Co.), a duly authorized agent, that all					
information shown hereon is true and correct	to the best of my knowledge and belief, that all					
acreage claimed attributable to the well na	med herein is held by production from that well					
and hereby make application for an allowabl	e to be assigned to the well upon the filing of					
this form and the State test, whichever is	later.					
	12 run et ilurent					
Sign	ature Shaw Hurrer					
	17th day of December, 19 2013					
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MINDY POT Notary Public, Stat						
My Commission expires Commission Expires	6 1 1040 ()					
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