

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

Expected Spud Date:	month	day	vear	Spot Description:	
	monur	uay	year	(0.0.0.0.)	E 🔲 🛚
PERATOR: License#				feet from N / S Line of	f Section
ame:				feet from E / W Line o	f Section
ddress 1:				Is SECTION: Regular Irregular?	
ddress 2:					
City:				County:	
Contact Person:				Lease Name: Well #:	
hone:				Field Name:	
CONTRACTOR: License#				Is this a Prorated / Spaced Field?	N
lame:				Target Formation(s):	
Well Drilled For:	Well Class	. Type	Equipment:	Nearest Lease or unit boundary line (in footage):	
				Ground Surface Elevation:	eet MS
Oil Enh F		=	Mud Rotary Air Rotary	Water well within one-quarter mile:	
Dispo	• =		Cable	Public water supply well within one mile:	- <u> </u>
Seismic ;# o				Depth to bottom of fresh water:	
Other:				Depth to bottom of usable water:	
				Surface Pipe by Alternate: II II	
If OWWO: old well	information as foll	ows:		Length of Surface Pipe Planned to be set:	
Operator:				Length of Conductor Pipe (if any):	
Well Name:				Projected Total Depth:	
Original Completion Da	ate:	Original Total D	Depth:	Formation at Total Depth:	
				Water Source for Drilling Operations:	
Directional, Deviated or Ho			Yes No	Well Farm Pond Other:	
f Yes, true vertical depth: _				DWR Permit #:	
Bottom Hole Location:				(Note: Apply for Permit with DWR)	
(CC DKT #:				VIII COTCS DC LAKETT:	N
				It yes brodosed zone.	
				If Yes, proposed zone:	
			AF	FIDAVIT	
	affirms that the d	rilling, complet			
The undersigned hereby			tion and eventual p	FIDAVIT	
The undersigned hereby t is agreed that the follow	ving minimum req	uirements will	tion and eventual p	FIDAVIT	
The undersigned hereby	ving minimum req	uirements will prior to spudd	tion and eventual p be met: ling of well;	FIDAVIT lugging of this well will comply with K.S.A. 55 et. seq.	
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The undersigned hereby to a sagreed that the follows 1. Notify the appropriate 2. A copy of the appropriate 3. The minimum amosthrough all unconses 4. If the well is dry how 5. The appropriate dis 6. If an ALTERNATE IN Or pursuant to Appropriate be completed a submitted Electron For KCC Use ONLY API # 15	ving minimum requate district office poved notice of interpretation of surface pipolidated materials le, an agreement strict office will be II COMPLETION, bendix "B" - Easte II within 30 days of the completion	prior to spudd ent to drill sha. e as specified s plus a minimu between the c e notified before production pip rn Kansas sur f the spud date	tion and eventual p be met: ling of well; II be posted on each below shall be se um of 20 feet into the perator and the disperator and the disperator and the disperator and the se um of 20 feet into the perator and the disperator and the disperator and the se perator and the disperator and the self or the well shall be et per ALT. I I II	In the drilling rig; It by circulating cement to the top; in all cases surface pipe shall be set the underlying formation. In this increase is a surface pipe shall be set the underlying formation. In this increase is a surface pipe shall be set the underlying formation. In this increase is a surface pipe shall be set the underlying formation. In this increase is a surface pipe shall be set the underlying formation. In this increase is a surface pipe shall be set the underlying form below any usable water to surface within 120 DAYS of spud date. In this increase is a surface prior to any cementing. In this increase is a surface prior to any cementing. In this increase is a surface prior to any cementing. Remember to: In this increase is a surface pipe shall be set the set of surface prior to any cementing. Remember to: In this increase is a surface pipe shall be set of surface pipe shall be	on ;

Side Two



For KCC Use ONLY	
API # 15	-

Operator: __

IN ALL CASES PLOT THE INTENDED WELL ON THE PLAT BELOW

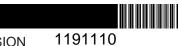
In all cases, please fully complete this side of the form. Include items 1 through 5 at the bottom of this page.

Location of Well: County: ___

se:		feet from	N / S Line of Section
l Number:		feet from	E / W Line of Section
d:	Sec	Twp S. R.	E W
nber of Acres attributable to well:	is section.	Regular or Irreg	ular
			n nearest corner boundary.
	Section corr	ner used: NE NW	SESW
	PLAT		
Show location of the well. Show footage to the I	nearest lease or unit boul		
lease roads, tank batteries, pipelines and electrical line	s, as required by the Kar tach a separate plat if de		Act (House Bill 2032).
iou may at	iacii a separate piat ii de	sireu.	
		LE	EGEND
			ell Location
			nk Battery Location peline Location
	: ;	-	ectric Line Location
		Le	ase Road Location
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		EXAMPLE	: :
33			
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: : : :	····· : ········· :	· •	1980' FSL
	····· :	·	
		562 ************************************	Jill: : :
	: :O—	502 II.	
NOTE: In all cases locate the spot of the proposed of			
	150 f	t.	

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.
- $2. \ \, \text{The distance of the proposed drilling location from the south / north and east / west outside section lines}.$
- 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:		SecTwpR 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	rea? Yes	No	Chloride concentration: mg/l (For Emergency Pits and Settling Pits only)		
Is the bottom below ground level?	Artificial Liner?		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 pit:	Depth to shallo Source of infor	west fresh water feet. nation:		
feet Depth of water wellfeet		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		Type of materia	over and Haul-Off Pits ONLY: Il utilized in drilling/workover: xing pits to be utilized: procedure:		
flow into the pit? Yes No Drill pits must be closed within 365 days of spud date. Submitted Electronically					
KCC OFFICE USE ONLY					
Date Received: Permit Number:Pe		Permi	Liner Steel Pit RFAC RFAS t Date: Lease Inspection: Yes No		



1191110

Form KSONA-1
January 2014
Form Must Be Typed
Form must be Signed
All blanks must be Filled

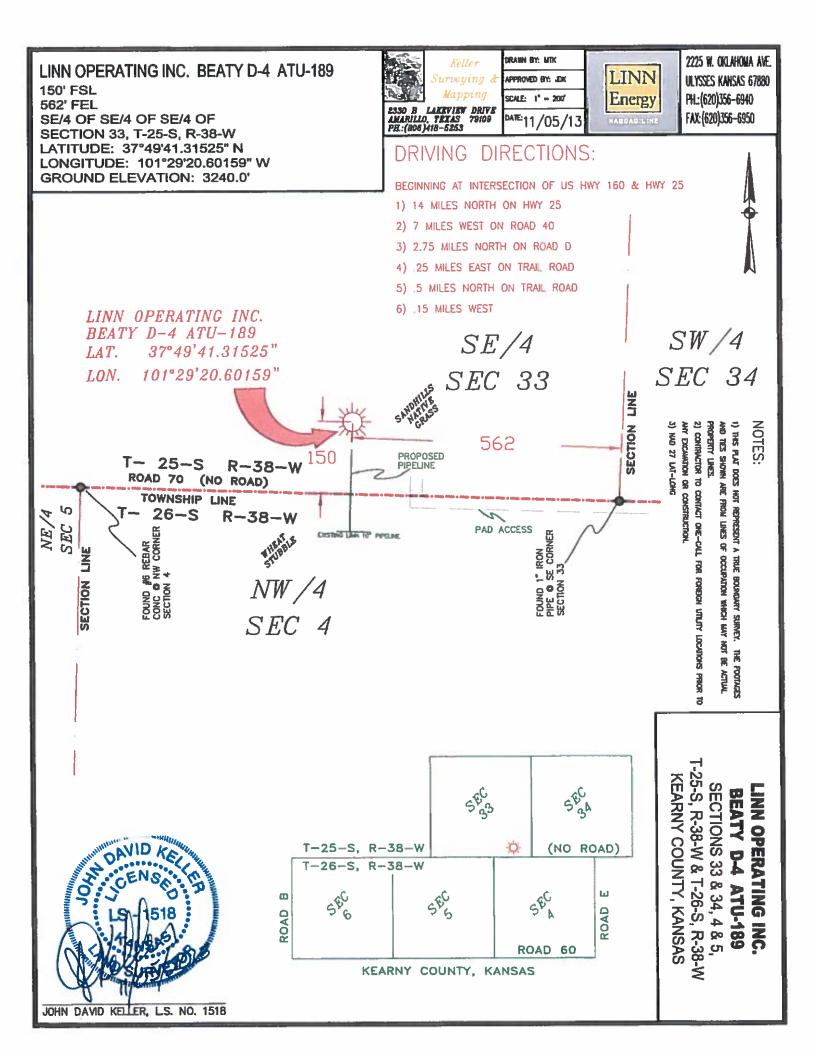
CERTIFICATION OF COMPLIANCE WITH THE KANSAS SURFACE OWNER NOTIFICATION ACT

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)

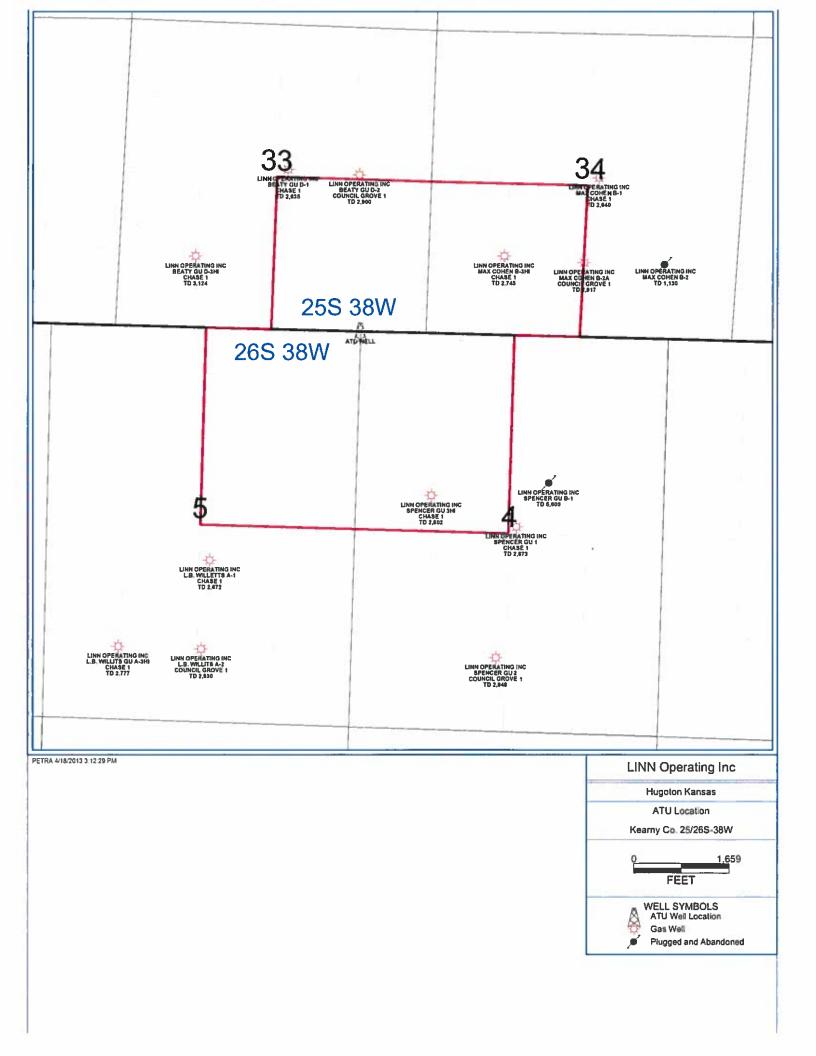
OPERATOR: License #				
Name:	· — —			
Address 1:	•			
Address 2:	Lease Name: Well #:			
City: State:	the lease below.			
Phone: () Fax: ()				
Email Address:	-			
Surface Owner Information:				
Name:				
Address 1:	sheet listing all of the information to the left for each surface owner. Surface owner information can be found in the records of the register of deeds for the			
Address 2:				
City: State: Zip:+	_			
are preliminary non-binding estimates. The locations may be entered	ank batteries, pipelines, and electrical lines. The locations shown on the plat If on 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	e Act (House Bill 2032), I have provided the following to the surface e located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form m being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address.			
KCC will be required to send this information to the surface	I acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this ess of the surface owner by filling out the top section of this form and e 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 C	ng fee with this form. If the fee is not received with this form, the KSONA-1 P-1 will be returned.			
Submitted Electronically				
I				



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-	Rearney Kearney			
OPERATOR Linn Operating, Inc.	LOCATION OF WELL: COUNTY Kearney			
TENSE Boaty	150 S feet from south/north line of section			
WELL NUMBER D-4 ATU-189	562 E feet from east / west line of section			
FIELD Hugoton-Panoma	SECTION 33 TWP 25 (S) RG 38W E/W			
NUMBER OF ACRES ATTRIBUTABLE TO WELL 640 QTR/QTR/QTR OF ACREAGE SE SE SE SE	IS SECTION X REGULAR OF IRREGULAR IF SECTION IS IRREGULAR, LOCATE WELL FROM NEAREST CORNER BOUNDARY. (check line below) Section corner used: NE NW SE SW			
(Show the location of the well and shade attr	ibutable acreage for prorated or spaced wells). boundary line; and show footage to the nearest			
common source supply well).	. Dodinary Line, and ones leveling to the members			
Common Botton Outpoin				
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	man			
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• • •	EXAMPLE			
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	10 10 10 10 10 10 10 10			
	. 3390'			
	SEWARD CO.			
The undersigned hereby certifies as Re	egulatory 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 e to be assigned to the well upon the filing of			
this form and the State test, whichever is	later.			
Sign	ature Sham Heuron			
Subscribed and sworn to before me on this 26th day of February , 19 2014				
MINDY POTOR & Judy 40 Tore				
Notary Public Notary Public Notary Public Notary Public FORM CG-8 (12/94)				
My Commission expires (12/94)				



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

Shari Feist Albrecht, Chair Thomas E. Wright, Commissioner Jay Scott Emler, Commissioner

February 27, 2014

Shawn Hildreth Linn Operating, Inc. 600 TRAVIS STE 5100 HOUSTON, TX 77002-3018

Re: Drilling Pit Application BEATY D-4 ATU-189 SE/4 Sec.33-25S-38W Kearny County, Kansas

Dear Shawn Hildreth:

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 within 96 hours of completion of drilling operations.

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.