

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

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1191380

Form C-1

March 2010

Form must be Typed

Form must be Signed

All blanks must be Filled

NOTICE OF INTENT TO DRILL

	re (5) days prior to commencing well s Surface Owner Notification Act, MUST be submitted with this form.						
Expected Spud Date:	Spot Description:						
month day year							
	- Sec. WP. S. R. E VV						
OPERATOR: License#	feet from E / W Line of Section						
Name:	Is SECTION: Regular Irregular?						
Address 1:	is SECTION. Regular III illegular !						
Address 2: State: Zip: +	(Note: Locate well on the Section Plat on reverse side)						
Contact Person:	County:						
Phone:	Lease Name: Well #:						
11010.	Field Name:						
CONTRACTOR: License#	is the different operation.						
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 MSL						
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:						
	Surface Pipe by Alternate: I II						
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:							
	Water Source for Drilling Operations:						
Directional, Deviated or Horizontal wellbore?	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:						
AE	EIDAVIT						
	FIDAVIT						
The undersigned hereby affirms that the drilling, completion and eventual pl	ugging 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	3 3 ,						
The minimum amount of surface pipe as specified below shall be set through all unconsolidated materials plus a minimum of 20 feet into the							
	strict office on plug length and placement is necessary <i>prior to plugging</i> ;						
5. The appropriate district office will be notified before well is either plug	, , , , , , , , , , , , , , , , , , , ,						
	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 spud date of the well shall b	e plugged. In all cases, NOTIFY district office prior to any cementing.						
Nuls and it is all the atmospherically a							
Submitted Electronically							
For KCC Use ONLY	Remember to:						
	- 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:	- Submit plugging report (CP-4) after plugging is completed (within 60 days);						
This authorization expires: (This authorization void if drilling not started within 12 months of approval date.)	Obtain written approval before disposing or injecting salt water.						
(This authorization void it drining not started within 12 months of approval date.)	If well will not be drilled or parmit has expired (See: authorized expiration data)						

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.

Well will not be drilled or Permit Expired	Date:	
Signature of Operator or Agent:		

m



SEWARD CO. 3390' FEL

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.

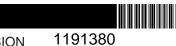
Location of Well: County:

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Lease:										fee	et from	N /	S Line	of Section
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Well Numb	er:									fee	et from	E /	W Line	of Section
Field:							S	ec.	Twp	5	S. R.		E	W
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Number of	Acres attrib	outable to	o well:								1			
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							S	ection corne	er used:	NE _	NW	SE	SW	
							PLAT							
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	lease road	ls, tank l	batteries, pi	ipelines an	d electrica	al lines, as	required i	by the Kansa	as Surface C	Owner N	otice Act	t (House E	3ill 2032).	
					You n	าav attach	a separate	e plat if desii	ired.					
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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

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 Drilling Pit Workover Pit Haul-Off Pit (If WP Supply API No. or Year Drilled)	Pit is: Proposed If Existing, date colling Pit capacity:	Existing	Sec. Twp. R. East West Feet from North / South Line of Section Feet 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 (fee	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.	illei		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	pilled fluids to	Drill pits must b	be closed within 365 days of spud date.				
Submitted Electronically							
	KCC	OFFICE USE O					
Date Received: Permit Num	ber:	Permi	Liner Steel Pit RFAC RFAS it Date: Lease Inspection: Yes No				



1191380

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.

OPERATOR: License #	Well Location:						
Name:	SecTwpS. R						
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 below:						
Phone: () Fax: ()							
Email Address:							
Surface Owner Information:							
Name:	When filing a Form T-1 involving multiple surface owners, attach an additional						
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:+							
are preliminary non-binding estimates. The locations may be entered or	s 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 lo	ct (House Bill 2032), I have provided the following to the surface ocated: 1) a copy of the Form C-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.						
KCC will be required to send this information to the surface ow	cknowledge that, because I have not provided this information, the vner(s). To mitigate the additional cost of the KCC performing this of the surface owner by filling out the top section of this form and 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 1 will be returned.						
Submitted Electronically							
·							

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

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

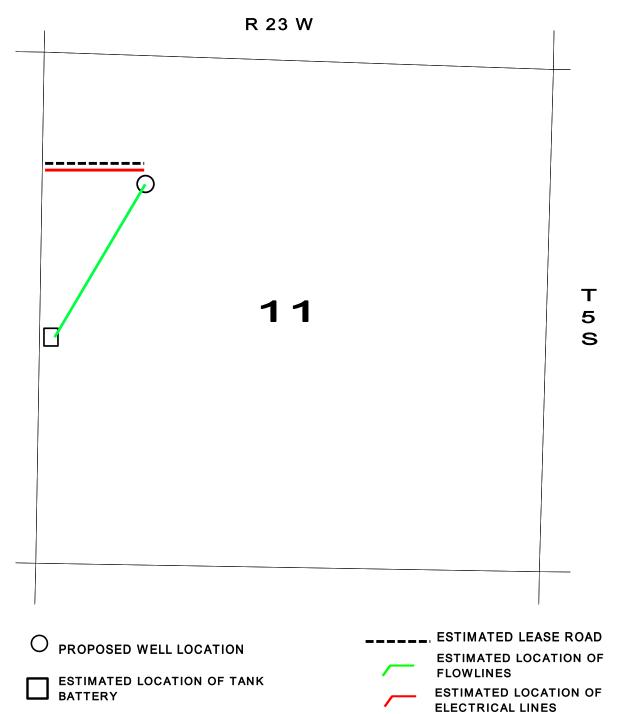
WELL NAME: HAGER TRUST 2-11

LOCATION: 1315 FNL / 1090 FWL Sec. 11-5S-23W NORTON COUNTY

SURFACE OWNER: RONALD R. & HELEN G. HAGER TRUST

RONALD R. & HELEN G. HAGER, TRUSTEES

302 WARD AVE NORTON, KS 67654



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

CLAYTON CAMOZZI Samuel Gary Jr. & Associates, Inc. 1515 WYNKOOP, STE 700 DENVER, CO 80202

Re: Drilling Pit Application HAGER TRUST 2-11 NW/4 Sec.11-05S-23W Norton County, Kansas

Dear CLAYTON CAMOZZI:

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.