

Well will not be drilled or Permit Expired Date: _

Signature of Operator or Agent:

For KCC	Use:	
Effective	Date:	
District #	<u> </u>	
SGA?	Yes No	

SGA?

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

month day year	Spot Description:
,	
PERATOR: License#	feet from N / S Line of Section
ame:	
ddress 1:	
ddress 2:	
ty: State: Zip: +	County:
ontact Person:hone:	Lease Name: Well #:
none.	Field Name:
ONTRACTOR: License#	Is this a Prorated / Spaced Field? Yes No
lame:	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 MS
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:
If OW/WO: ald wall information as follows:	Surface Pipe by Alternate: III
If OWWO: old well information as follows:	Length of Surface Pipe Planned to be set:
Operator:	
Well Name:	Projected Total Depth:
Original Completion Date: Original Total Depth:	
Directional, Deviated or Horizontal wellbore?	Water Source for Drilling Operations:
f Yes, true vertical depth:	
Bottom Hole Location:	DWK Permit #.
KCC DKT #:	(Note: Apply for a strike with EVIX.
	Will Cores be taken?
	If Yes, proposed zone:
	AFFIDAVIT
The undersigned hereby affirms that the drilling, completion and eventua	I plugging of this well will comply with K.S.A. 55 et. seq.
t is agreed that the following minimum requirements will be met:	
1. 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 e	each drilling rig;
2. Woopy of the approved house of intent to anii shan be posted on a	
3. The minimum amount of surface pipe as specified below shall be	
 The minimum amount of surface pipe as specified below shall be through all unconsolidated materials plus a minimum of 20 feet into 	the underlying formation.
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_ Agent: .



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.

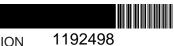
Location of Well: County:

Operator.								oation of troi	County
Lease:									feet from N / S Line of Section
Well Num	ber:						_		feet from E / W Line of Section
Well Number: Field:							0	,c	Twp S. R
Field:							_	.0	. INP 0. IX
Number o	of Acres atti	ributable to	well:				_ lo	Section:	Regular or Irregular
	QTR/QTR/QTR/QTR of acreage:								Regular or irregular
2110211							-		
									regular, locate well from nearest corner boundary.
							Se	ection corner	used: NE NW SE SW
							PLAT		
	0	ha la a a t':	f 11 · ·	Cha	f1 1-				mulina Chavutha muadiatad laaatiana af
					_				ry line. Show the predicted locations of
	lease roa	ads, tank b	atteries, p	ipelines an				-	s Surface Owner Notice Act (House Bill 2032).
		40	00 4		You m	ay attach a	a separate	plat if desire	d.
		19	80 ft.						
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			:	:		:	:		LEGEND
		:	:	:		:	:	:	LEGEND
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			:	:		:	:		
			:	:		:	:		Tank Battery Location
			• • • • • • • • • • • • • • • • • • • •		•••••				Pipeline Location
		:	:	:		:	:	:	Electric Line Location
			:	:		:	:		Lease Road Location
990 ft.		·	:			:	:		
990 II.		:	:	:		:	:	:	
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		:	:	:		:	:	:	SEWARD CO. 3390' FEL

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: Burn Pit Burn P	Pit is:	Existing	SecTwp R		
Settling Pit Workover Pit Haul-Off Pit (If WP Supply API No. or Year Drilled)	If Existing, date con Pit capacity:	structed:(bbls)	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 N	No	Chloride concentration: mg/l (For Emergency Pits and Settling Pits only)		
Is the bottom below ground level? Yes No	Artificial Liner?	0	How is the pit lined if a plastic liner is not used?		
Pit dimensions (all but working pits):	Length (fee	t)	Width (feet) N/A: Steel Pits		
Depth fro	om ground level to deep	pest point:	(feet) No Pit		
If the pit is lined give a brief description of the line material, thickness and installation procedure.			dures for periodic maintenance and determining cluding any special monitoring.		
Distance to nearest water well within one-mile of	of pit:	Depth to shallor Source of inforr	west fresh water feet. nation:		
feet Depth of water well	feet	measured	well owner electric log KDWR		
Emergency, Settling and Burn Pits ONLY:		Drilling, Workover 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 splow into the pit? Yes No	pilled fluids to	Drill pits must be closed within 365 days of spud date.			
Submitted Electronically					
	кссс	OFFICE USE O	NLY Steel Pit RFAC RFAS		
Date Received: Permit Numb	ber:	Permi	t Date: Lease Inspection: Yes No		



1192498

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 #	_ Well Location:				
Name:					
Address 1:					
Address 2:	Lease Name: Well #:				
City: State: Zip:+	_ If filing a Form T-1 for multiple wells on a lease, enter the legal description or				
Contact Person:	the lease helow:				
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:	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 Select one of the following: I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be CP-1 that I am filing in connection with this form; 2) if the form	ank batteries, pipelines, and electrical lines. The locations shown on the plated on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. E. Act (House Bill 2032), I have provided the following to the surface the located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form mobeing filed is a Form C-1 or Form CB-1, the plat(s) required by this				
form; and 3) my operator name, address, phone number, fax	, 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 less of the surface owner by filling out the top section of this form and the KCC, which is enclosed with this form.				
If choosing the second option, submit payment of the \$30.00 handliform and the associated Form C-1, Form CB-1, Form T-1, or Form C	ing fee with this form. If the fee is not received with this form, the KSONA-1 P-1 will be returned.				
Submitted Electronically					
I					

Township:		lange:		County:		State:	
1980 I	FNL WL						
					,		

	Tank Battery	 Road
	Pipeline	 Electric Line

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

March 11, 2014

Daniel Windholz FourWinds Oil Corporation PO BOX 1063 HAYS, KS 67601

Re: Drilling Pit Application McCue 1 NW/4 Sec.27-06S-20W Rooks County, Kansas

Dear Daniel Windholz:

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 72 hours of completion of drilling operations. KEEP PITS away from draw/drainage. KEEP PITS on NORTH side of stake.

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.