# 

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 1195527

Form C-1

March 2010

Form must be Typed

Form must be Signed

All blanks must be Filled

## **NOTICE OF INTENT TO DRILL**

	Spot Description:
month day year	(Q/Q/Q/Q) Sec Twp S. R 🔲 E 🔲 V
DPERATOR: License#	foot from   N /   S Line of Section
Name:	feet from E / W Line of Sectio
ddress 1:	Is SECTION: Regular Irregular?
ddress 2:	(Note: Locate well on the Section Plat on reverse side)
City: State: Zip: +	——— County:
ontact Person:	Lease Name: Well #:
hone:	Field Name:
ONTRACTOR: License#	
lame:	Target Formation(s):
Well Drilled For: Well Class: Type Equipment:	Negroot League or unit boundary line (in footage):
	Ground Surface Elevation: feet MS
Oil Enh Rec Infield Mud Rotary	Water well within one-quarter mile:
Gas Storage Pool Ext. Air Rotary Disposal Wildcat Cable	Public water supply well within one mile:
Disposal   Wildcat   Cable     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:	
Original Completion Date: Original Total Depth:	
	Water Source for Drilling Operations:
	No Well Farm Pond Other:
Yes, true vertical depth:	DWR Permit #:
Bottom Hole Location:	(Makes Apply for Domest with DIAID
	(Note: Apply for Fernix with DWK)
	(Note: Apply for Fernilt with DWK)
	(Note: Apply to Fernic with DWK
	Will Cores be taken?  If Yes, proposed zone:
CCC DKT #:	Will Cores be taken?  If Yes, proposed zone:  AFFIDAVIT
CCC DKT #:	Will Cores be taken? Yes Neft Permit Will DWN
CCC DKT #:  The undersigned hereby affirms that the drilling, completion and event is agreed that the following minimum requirements will be met:	Will Cores be taken?  If Yes, proposed zone:  AFFIDAVIT rentual plugging of this well will comply with K.S.A. 55 et. seq.
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SEWARD CO. 3390' FEL

Location of Well: County: \_

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.

Lease:									feet from N / S Line of Section
Well Num	ber:								feet from E / W Line of Section
Field:							_ Se	ec	Twp S. R
	f Acres attr						- Is	Section:	Regular or Irregular
QIR/QIR	/QTR/QTR	of acreag	e:				_		
								Section is ection corne	s Irregular, locate well from nearest corner boundary.  ner used: NE NW SE SW
	C)	how loostic	on of the w	voll Show	faataga ta		PLAT	r unit houng	adam line. Show the predicted legations of
		nds, tank b			d electrica	al lines, as	required l		ndary line. Show the predicted locations of sas Surface Owner Notice Act (House Bill 2032). sired.
		.		•		•	•	•	7
			:				:		LEGEND
	•••••	:	:	:	•••••	:	········ :	:	O Well Location
		:	:	:		:	:	:	Tank Battery Location  Pipeline Location
			:	:	•••••	:	:		Electric Line Location
200 (1							:		Lease Road Location
990 ft.		<del></del> :	:	:	••••	:	:	:	
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		:	:	:		:	:	:	

#### 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.

NOTE: In all cases locate the spot of the proposed drilling locaton.

- 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.

CORRECTION #1 1195527

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 collination  Pit capacity:	Existing	SecTwpR East WestFeet from Rast / West Line of SectionFeet 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 shallowest fresh water feet. Source of information:			
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 be closed within 365 days of spud date.			
Submitted Electronically					
KCC OFFICE USE ONLY					
Date Received: Permit Number:			Liner Steel Pit RFAC RFAS it Date: Lease Inspection: Yes No		

# CORRECTION #1

Kansas Corporation Commission 1195527

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

OIL & GAS CONSERVATION DIVISION

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:	SecTwpS. R East West				
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 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 county, and in the real estate property tax records of the county treasurer.				
Address 2:					
City:	_				
the KCC with a plat showing the predicted locations of lease roads, to	thodic Protection Borehole Intent), you must supply the surface owners and ank batteries, pipelines, and electrical lines. The locations shown on the plat d on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.				
owner(s) of the land upon which the subject well is or will b	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 k, 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 the KCC, which is enclosed with this form.				
If choosing the second option, submit payment of the \$30.00 handli form 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 CP-1 will be returned.				
Submitted Electronically					
I					

# **Summary of Changes**

Lease Name and Number: McCue 1 API/Permit #: 15-163-24193-00-00

Doc ID: 1195527

Correction Number: 1

Approved By: Rick Hestermann 03/24/2014

Field Name	Previous Value	New Value
KCC Only - Approved By	Rick Hestermann 03/11/2014	Rick Hestermann 03/24/2014
KCC Only - Approved Date	03/11/2014	03/24/2014
KCC Only - Date Received	03/11/2014	03/24/2014
KCC Only - Lease Inspection	Yes	No
LocationInfoLink	https://solar.kgs.ku.edu/kcc/detail/locationInform	https://kolar.kgs.ku.edu/kcc/detail/locationInformation.cfm?section=27&t//kcc/detail/operatorEditDetail.cfm?docID=11
Save Link	ation.cfm?section=27&t//kcc/detail/operatorE ditDetail.cfm?docID=11	
Water Source for Drilling Operations	92498 Well	95527 Pond