

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

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1198444

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 Twp S. R E W
OPERATOR: License#	feet from E / W Line of Section
Name:	LOSSTICK DR. L. C.
Address 1:	is SECTION Regular Irregular?
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#	io tillo di l'iolatod / Opacod l'iola.
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 III
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:	- ,
Original Completion Date:	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? Yes No
	If Yes, proposed zone:
	FIDAVIT
The undersigned hereby affirms that the drilling, completion and eventual pl	lugging 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 prior to spudding of well; 	
2. A copy of the approved notice of intent to drill shall be posted on each	5 5,
The minimum amount of surface pipe as specified below shall be se 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 or the well shall b	be plugged. In all cases, NOTIFY district office prior to any cementing.
N 1 - 1/2 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	
Submitted Electronically	
E KOOTI ONIV	Remember to:
For KCC Use ONLY	- 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;
Approved by:	 Notify appropriate district office 48 hours prior to workover or re-entry; Submit plugging report (CP-4) after plugging is completed (within 60 days);
This authorization expires:	 Submit plugging report (OP-4) after plugging is completed (within 60 days), Obtain written approval before disposing or injecting salt water.
(This authorization void if drilling not started within 12 months of approval date.)	If well will not be drilled or permit has expired (See sutherized 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:	



SEWARD CO. 3390' FEL

1980' FSL

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.

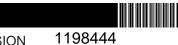
Location of Well: County: ___

Lease:							feet from N / S Line of Section		
Well Numb	oer:						feet from E / W Line of Section		
Field:						SecTwpS. R			
						Is Section:	Regular or Irregular		
							s Irregular, locate well from nearest corner boundary. er used: NE NW SE SW		
	Show lo	cation of	the well. Show foo	tage to the n	PLA nearest lea		ndary line. Show the predicted locations of		
	lease roads, ta	nk batteri	es, pipelines and e	lectrical lines	s, as requi	ired by the Kans	sas Surface Owner Notice Act (House Bill 2032).		
	1630	ft.		You may att	tach a sep	arate plat if des	sired.		
		:		:		:	LEGEND		
					:		O Well Location Tank Battery Location Pipeline Location		
530 ft				:	:		Electric Line Location Lease Road Location		
		: : : : : : : : : : : : : : : : : : :					EXAMPLE : :		
			4	; ; ; ;	:	; ; ;			

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 Haul-Off Pit (If WP Supply API No. or Year Drilled) Is the pit located in a Sensitive Ground Water A	Pit is: Proposed Existing If Existing, date constructed: Pit capacity: (bbls)		SecTwpR East WestFeet from North / South Line of SectionFeet from East / West Line of SectionCounty Chloride concentration: mg/l (For Emergency Pits and Settling Pits only)		
Is the bottom below ground level? Yes No	Artificial Liner?	No	How is the pit lined if a plastic liner is not used?		
Pit dimensions (all but working pits):Length (feet) Depth from ground level to deepest p					
If the pit is lined give a brief description of the liner material, thickness and installation procedure. Describe procedures for periodic maintenance and determining liner integrity, including any special monitoring.					
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 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		Type of materia	over and Haul-Off Pits ONLY: all utilized in drilling/workover: king pits to be utilized: procedure:		
Submitted Electronically					
KCC OFFICE USE ONLY Liner Steel Pit RFAC RFAS					
Date Received: Permit Num	ber:	Permi	t Date: Lease Inspection: Yes No		



1198444

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:				
Address 1:	County:			
Address 2:	Lease Name: Well #:			
City: State: Zip:+	g			
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			
Address 2:	and the second in the construction of the cons			
City: State: Zip:+	-			
	ank batteries, pipelines, and electrical lines. The locations shown on the plat I 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 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 being filed is a Form C-1 or Form CB-1, the plat(s) required by this , and email address.			
	Lacknowledge that hecourse I have not provided this information, the			
	owner(s). To mitigate the additional cost of the KCC performing this ss of the surface owner by filling out the top section of this form and			
KCC will be required to send this information to the surface task, I acknowledge that I must provide the name and address that I am being charged a \$30.00 handling fee, payable to the	owner(s). To mitigate the additional cost of the KCC performing this so of the surface owner by filling out the top section of this form and e KCC, which is enclosed with this form. If the fee is not received with this form, the KSONA-1			
KCC will be required to send this information to the surface task, I acknowledge that I must provide the name and address that I am being charged a \$30.00 handling fee, payable to the If choosing the second option, submit payment of the \$30.00 handling fee.	owner(s). To mitigate the additional cost of the KCC performing this so of the surface owner by filling out the top section of this form and e KCC, which is enclosed with this form. If the fee is not received with this form, the KSONA-1			

Township:	Range:	County:	State:	
1630' FNL 530' FWL				

Tank Battery

__ Pipeline

Road

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

April 10, 2014

Kenneth Vehige Black Diamond Oil, Inc. PO BOX 641 HAYS, KS 67601-0641

Re: Drilling Pit Application Glennemeier 1 NW/4 Sec.04-05S-21W Norton County, Kansas

Dear Kenneth Vehige:

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.

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.