

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:	Spot Description:			
month day year				
OPERATOR: License#	(O/O/O/Q) feet from N / S Line of Section			
Name:	feet from E / W Line of Section			
Address 1:	Is SECTION: Regular Irregular?			
Address 2:	(Note: Locate well on the Section Plat on reverse side)			
City: State: Zip: +	County:			
Contact Person:	Lease Name: Well #:			
Phone:	Field Name:			
CONTRACTOR: License#	Is this a Prorated / Spaced Field?			
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:			
	Surface Pipe by Alternate: 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:	Projected Total Depth:			
Original Completion Date: Original Total Depth:	Formation at Total Depth:			
	Water Source for Drilling Operations:			
Directional, Deviated or Horizontal wellbore?	Well Farm Pond Other:			
f Yes, true vertical depth:	DWR Permit #:			
CCC DKT #:	( <b>Note:</b> Apply for Permit with DWR )			
	Will Cores be taken?			
	If Yes, proposed zone:			
AFF	IDAVIT			
The undersigned hereby affirms that the drilling, completion and eventual plu	gging of this well will comply with K.S.A. 55 et. seq.			
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	drilling rig;			
3. The minimum amount of surface pipe as specified below <b>shall be set</b>				
through all unconsolidated materials plus a minimum of 20 feet into the	• •			
·				
4. If the well is dry hole, an agreement between the operator and the dist				
<ul><li>4. If the well is dry hole, an agreement between the operator and the dist</li><li>5. The appropriate district office will be notified before well is either plugg</li></ul>	ed or production casing is cemented in;			
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Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

Spud 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:	



For KCC Use ONLY	
API # 15	

#### 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.

Operator	:						_ Loc	cation of W	Vell: County:	
_ease:									feet from N / S Line of Section	
Nell Num	nber:								feet from E / W Line of Section	
Field:			_ Se							
	of Acres atti R/QTR/QTR						15 1	Section:	Regular or Irregular	
									er used: NE NW SE SW	
							DI AT			
	S	how location	on of the w	ell. Show	footage to	the neare	PLAT est lease or	unit bound	ndary line. Show the predicted locations of	
					d electrica	al lines, as	required b	y the Kans	sas Surface Owner Notice Act (House Bill 2032).	
					You m	ay attach a	a separate	plat if desi	sired. 22 ft.	
		:	:	:		:	:		196 ft.	
		:	:	: :		:	:		LEGEND	
	•••••		:		•••••		:		O Well Location	
			:				:		Tank Battery Location	
		:	:	:		:	:	:	Pipeline Location	
		:	:	:		:	:	:	Electric Line Location	
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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  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)  Area? Yes No		SecTwp R East WestFeet from North / South Line of Section Feet from East / West Line of Section County Chloride concentration: mg/l 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 (fee			
If the pit is lined give a brief description of the li material, thickness and installation procedure.			dures for periodic maintenance and determining acluding 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  Drill pits must be closed within 365 days of spud date.				
KCC OFFICE USE ONLY  Liner Steel Pit RFAC RFAS				
Date Received: Permit Num	ber:	Permi	t Date: Lease Inspection: Yes No	



1200171

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

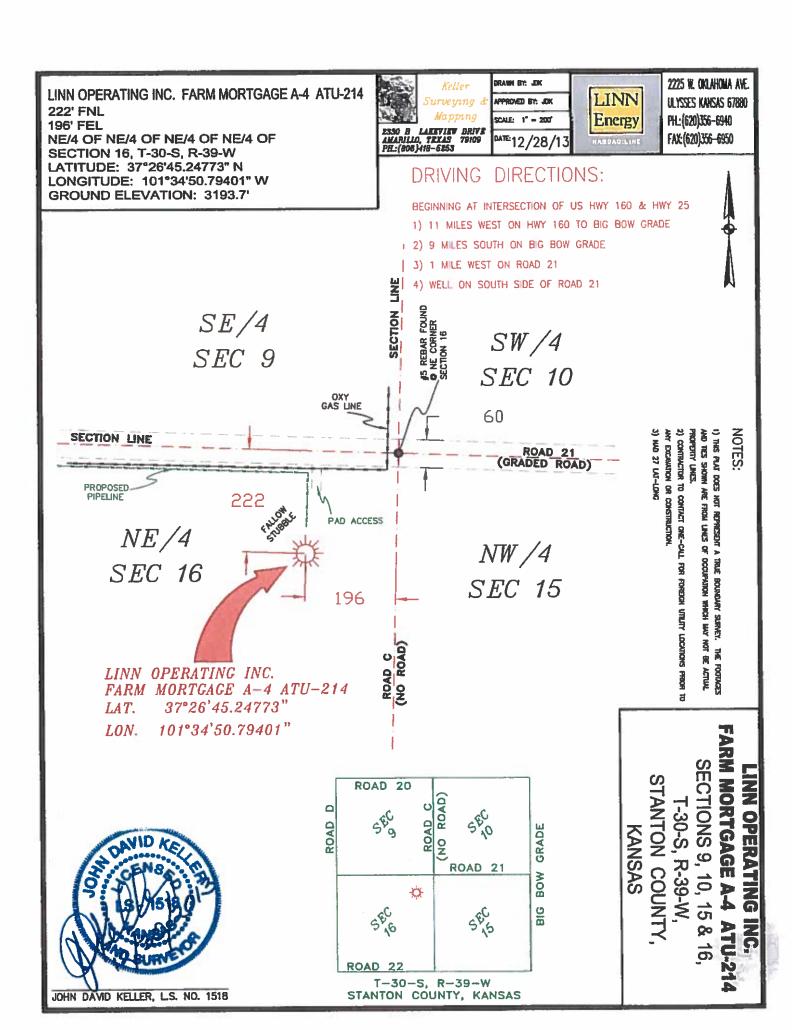
# CERTIFICATION OF COMPLIANCE WITH THE KANSAS SURFACE OWNER NOTIFICATION ACT

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:	SecTwpS. R		
Address 1:	County:		
Address 2:	Lease Name: Well #:		
City: State: Zip:+	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:	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 1:			
Address 2:			
City: State: Zip:+			
are preliminary non-binding estimates. The locations may be entered of	k 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	act (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 will be returned.		
Submitted Electronically			



## 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	LOCATION OF WELL: COUNTY Stanton				
OPERATOR LINN Operating, Inc.	222 N feet from south/north line of section				
WELL NUMBER A-4 ATU-214	196 E feet from east / west line of section				
FIELD Hugoton-Panoma	30 207				
NUMBER OF ACRES ATTRIBUTABLE TO WELL 640	SECTION 16 TWP 30 (S) RG 39W E/W IS SECTION X REGULAR OF IRREGULAR				
QTR/QTR/QTR OF ACREAGE NE NE NE	IF SECTION IS IRREGULAR, LOCATE WELL FROM NEAREST CORNER BOUNDARY. (check line below)				
(Show the location of the well and shade attri	Section corner used: NE NW SE SW butable acreage for prorated or spaced wells). boundary line; and show footage to the nearest				
	Doundary Itus, and snow rootage to the negrous				
common source supply well).					
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	SEWARD CO.				
Mhe undergioned housely contified as Do	gulatory Compliance Advisor (title) for				
The undersigned hereby certifies as Regulatory 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 named herein is held by production from that well and hereby make application for an allowable to be assigned to the well upon the filing of					
this form and the State test, whichever is later.					
1. 11.					
Signa	ture Shaw Theret				
Subscribed and sworn to before me on this 15th day of April , 19 2014					
Expression Tulles TOTOR					
MINDY POTOR Notary Public					
My Commission expires Notary Public State of	FORM CG-8 (12/94)				
Commission Expires 02	-19-2017 <b>§</b>				
Description of the second seco					

