

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

1202316

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	Sec Twp S. R 🔲 E 🔲 V						
DPERATOR: License#	(0/0/0/0) feet from N / S Line of Section						
Name:	feet from E / W Line of Section						
ddress 1:	Is SECTION: Regular Irregular?						
ddress 2:	(Note: Locate well on the Section Plat on reverse side)						
City: State: Zip: +	County:						
Contact Person:	Lease Name: Well #:						
hone:	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:						
If OWWO: old well information as follows:	Surface Pipe by Alternate: I II						
	Length of Surface Pipe Planned to be set:						
Operator:	Length of Conductor Pipe (if any):						
Well Name: Original Total Depth:	Frojected Total Depth:						
Original Completion Bate Original Total Beptil	Water Source for Drilling Operations:						
irectional, Deviated or Horizontal wellbore?	Well Farm Pond Other:						
Yes, true vertical depth:	DWR Permit #:						
Bottom Hole Location:	(Note: Apply for Permit with DWR)						
(CC DKT #:	Will Cores be taken?						
	If Yes, proposed zone:						
	If Yes, proposed zone:						
AFF	IDAVIT						
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AFF The undersigned hereby affirms that the drilling, completion and eventual plu	IDAVIT gging of this well will comply with K.S.A. 55 et. seq.						
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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:

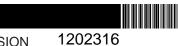
Operator								Janon Or VV	on. County.					
Lease:										fee	et from	N /	S Line	of Section
Well Number:								fee	et from	E /	W Line	of Section		
Field:								C	Twp		S. R		E	W
	Acres attrib						- Is	Section:	Regular	or	Irregula	ar		
QTR/QTR/	QTR/QTR o	of acreage	ə:				_							
									Irregular, loc		_		rner boun	dary.
							Se	ction corne	er used:	NE	NW	SE S	SW	
							PLAT							
					_				dary line. Sho					
	lease road	s, tank ba	atteries, pi	pelines and					as Surface O	wner N	lotice Ac	t (House B	ill 2032).	
				1155	ft.	ау аттасп а	a separate	plat if desi	irea.					
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	:			:		:	:	:			LEG	END		
	:			:	•••••	:		:		0	Well	Location		
A 4 F EL									Tank Battery Location					
2145 ft				<u>-</u> ©	••••			•			- Pipel	line Locat	ion	
	:			:		:	:	:			Elect	tric Line L	ocation	
	:					:	:	:			Leas	e Road L	ocation	
	••••				••••									
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	1 :					:	:	:	SEWA	ARD CO.	3390' FE	ΞL		

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.



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:	Pit is:							
Emergency Pit Burn Pit	Proposed	Existing	SecTwp R					
Settling Pit Drilling Pit If Existing, date co		nstructed:	Feet from North / South Line of Section					
Workover Pit Haul-Off Pit (If WP Supply API No. or Year Drilled)	Pit capacity:		Feet from East / West Line of SectionCounty					
	(bbls)							
Is the pit located in a Sensitive Ground Water A	rea? Yes	No	Chloride concentration: mg/l (For Emergency Pits and Settling Pits only)					
Is the bottom below ground level?	Artificial Liner?		How is the pit lined if a plastic liner is not used?					
Yes No	Yes N	No						
Pit dimensions (all but working pits):	Length (fe	et)	Width (feet) N/A: Steel Pits					
	om ground level to dee							
If the pit is lined give a brief description of the li material, thickness and installation procedure.	ner	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 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, 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 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 Liner Steel Pit RFAC RFAS								
Date Received: Permit Num	her:	Darmi	t Date: Lease Inspection: Yes No					



1202316

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

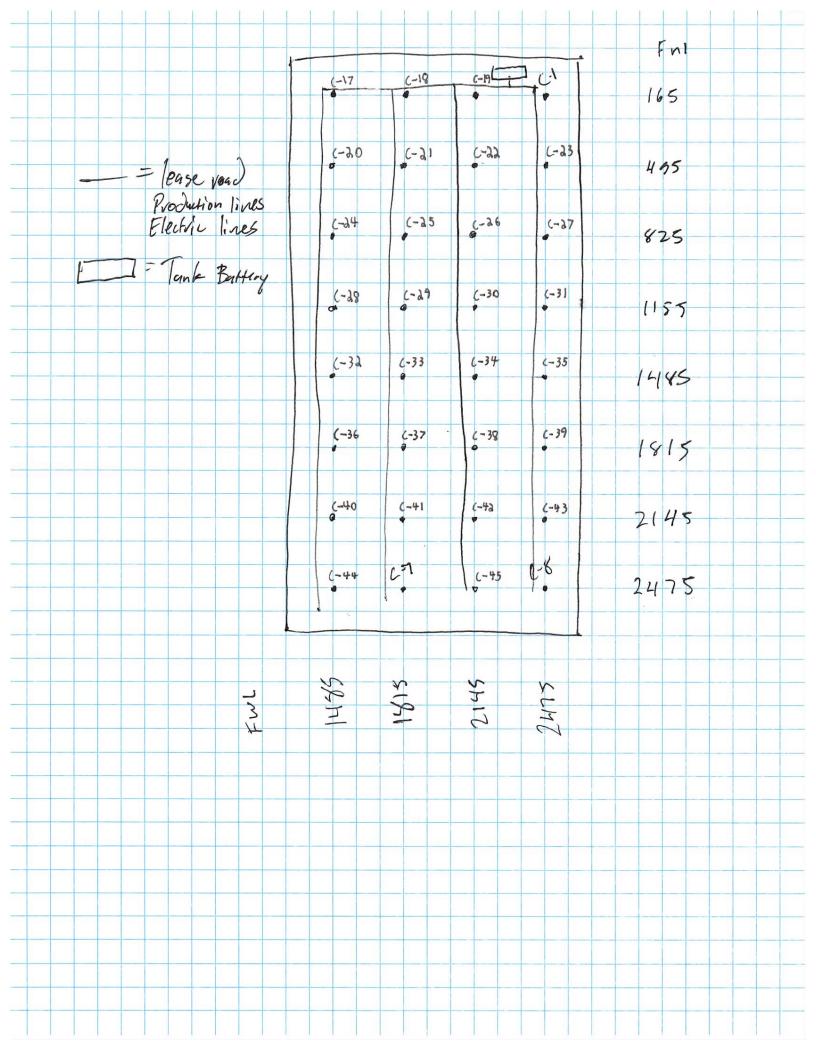
CERTIFICATION OF COMPLIANCE WITH THE KANSAS SURFACE OWNER NOTIFICATION ACT

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:	County:					
Address 2:	Lease Name: Well #:					
City:	the lease below:					
Contact Person:						
Phone: () Fax: () Email Address:						
Surface Owner Information:						
Name:						
Address 1:	owner information can be lound in the records of the register of deeds for the					
Address 2:						
City: State: Zip:+						
are preliminary non-binding estimates. The locations may be entered	nk batteries, pipelines, and electrical lines. The locations shown on the plat on 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	Act (House Bill 2032), I have provided the following to the surface 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.					
KCC will be required to send this information to the surface of	acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this as of the surface owner by filling out the top section of this form and a KCC, which is enclosed with this form.					
If choosing the second option, submit payment of the \$30.00 handlin form and the associated Form C-1, Form CB-1, Form T-1, or Form CF	g fee with this form. If the fee is not received with this form, the KSONA-1 P-1 will be returned.					
Submitted Electronically						
I						



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 Jay Scott Emler, Commissioner Pat Apple, Commissioner

May 01, 2014

Jorge Ranz SCZ Resources, LLC 8614 CEDARSPUR DR HOUSTON, TX 77055

Re: Drilling Pit Application CANNON C-30 NW/4 Sec.22-26S-18E Allen County, Kansas

Dear Jorge Ranz:

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.

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 (620) 432-2300 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 (620) 432-2300.