

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

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1204394

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. WP. S. R. E VV			
OPERATOR: License#	feet from E / W Line of Section			
Name:	Is SECTION: Regular Irregular?			
Address 1:	is SECTION. Regular III illegular !			
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#	is the different operation.			
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 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:	Projected Total Depth:			
Original Completion Date: Original Total Depth:				
	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?			
	If Yes, proposed zone:			
AE	EIDAVIT			
	FIDAVIT			
The undersigned hereby affirms that the drilling, completion and eventual pl	ugging 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 <i>prior</i> to spudding of well; 				
2. A copy of the approved notice of intent to drill shall be posted on each	3 3 .			
The minimum amount of surface pipe as specified below shall be set 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 of the well shall b	e plugged. In all cases, NOTIFY district office prior to any cementing.			
Nuls and it is all the atmospherically a				
Submitted Electronically				
For KCC Use ONLY	Remember to:			
	- 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; Notify appropriate district office 48 hours prior to workover or re-entry; 			
Approved by:	- Submit plugging report (CP-4) after plugging is completed (within 60 days);			
This authorization expires: (This authorization void if drilling not started within 12 months of approval date.)	Obtain written approval before disposing or injecting salt water.			
(This authorization void it drining not started within 12 months of approval date.)	If wall will not be drilled or permit has expired (Sec. authorized expiration date)			

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.

m

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

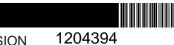
In all cases, please fully complete this side of the form. Include items 1 through 5 at the bottom of this page.

erator:						_ Lo	cation of W	Vell: County:		
ıse:								feet from N / S Line of Section		
l Number:						_		feet from E / W Line of Section		
ld:						Se	SecTwpS. R E W			
mber of Acres attr						– is a	Section:	Regular or Irregular		
						If S	Section is I	Irregular, locate well from nearest corner boundary. er used: NE NW SE SW		
				_				dary line. Show the predicted locations of		
lease roa	ids, tank b	atteries, pi	pelines and		av attach a		y the Kans plat if desi	sas Surface Owner Notice Act (House Bill 2032). ired.		
	:	:	: : : :		:	:	:	LEGEND		
	:		:					O Well Location		
	:	:	:		:	:		Tank Battery Location Pipeline Location		
	:	:	: : :		: :	:	: :	Electric Line Location		
	:	:	:		:	:	:	Lease Road Location		
	:	:	:	 	· ·	:	:	_ 239 <u>0</u> ft.		
	:	:	:		:	:	:	EXAMPLE :		
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		:	:		:	:		: : : :		

 ${\it NOTE: In all \ cases \ locate \ the \ spot \ of \ the \ proposed \ drilling \ locaton.}$

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:	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 Section		
	(bbls)		County		
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		dures for periodic maintenance and determining cluding any special monitoring.		
Distance to nearest water well within one-mile of	of pit:	Depth to shallo Source of infor	west fresh water feet.		
feet Depth of water well	feet	measured	well owner electric log KDWR		
Emergency, Settling and Burn Pits ONLY:		Drilling, Work	ver 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		



1204394

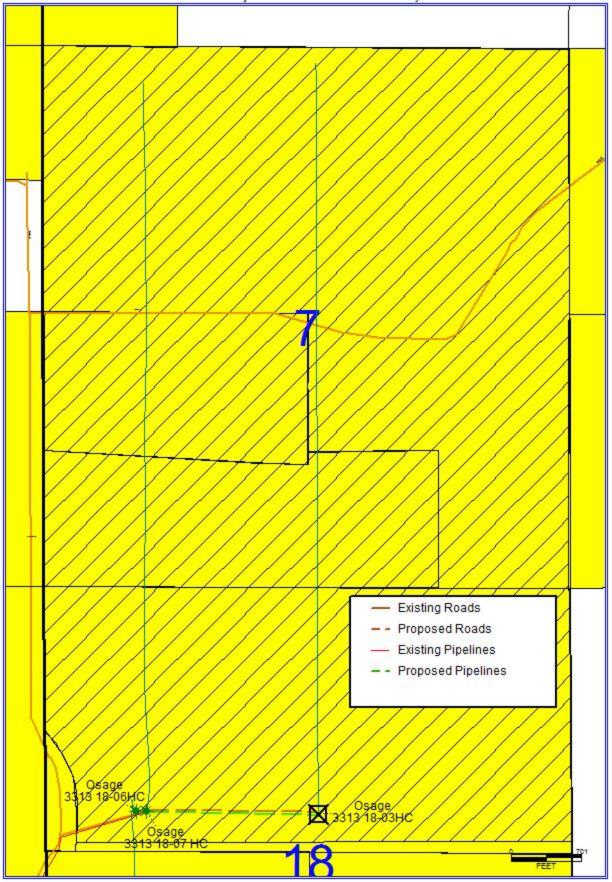
Form KSONA-1
January 2014
Form Must Be Typed
Form must be Signed
All blanks must be Filled

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:					
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:	When filing a Form T-1 involving multiple surface owners, attach an additiona				
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 toy records of the county traceurer				
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. Be 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 handling 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 P-1 will be returned.				
Submitted Electronically					
I					



Osage No. 3313 18-03HC Lease Information Sheet

UNIT DESCRIPTION:

All Section 7-33S-13W and All N/2 less an approximate 8 acre tract located in the SW/4 NW/4 Sec. 18-33S-13W Barber County, KS $^{\circ}$

SURFACE OWNER:

William and Debra Bell 107 E. Stolp Medicine Lodge, KS 67104 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

June 10, 2014

Jeff Dale OSAGE Resources, LLC 6209 N K61 HWY HUTCHINSON, KS 67502-8608

Re: Drilling Pit Application Osage No. 18-03HC NE/4 Sec.18-33S-13W Barber County, Kansas

Dear Jeff Dale:

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 as soon as the Hutchinson Salt section has been drilled through and displacement of the fluids into the reserve pit has occurred. The fluids should be removed again within 96 hours 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) 225-8888 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) 225-8888.