

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

1207879

Form C-1

March 2010

Form must be Typed

Form must be Signed

All blanks must be Filled

NOTICE OF INTENT TO DRILL

Function Could Date:	Snot Deparintion:
Expected Spud Date: month day year	Spot Description:
OPERATOR: License#	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: +	County:
Phone:	Lease Name: Well #:
	Field Name:
CONTRACTOR: License#	Is this a Prorated / Spaced Field?
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: 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? Yes No	Well Farm Pond Other:
If Yes, true vertical depth: Bottom Hole Location:	DWR Permit #:
KCC DKT #:	(Note: Apply for Permit with DWR)
NOO BIN #:	Will Cores be taken?YesNo
	If Yes, proposed zone:
AFF	IDAVIT
AFF The undersigned hereby affirms that the drilling, completion and eventual plu	
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The undersigned hereby affirms that the drilling, completion and eventual plu	gging of this well will comply with K.S.A. 55 et. seq.
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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:	Location of Well: County:
Lease:	feet from N / S Line of Section
Well Number:	
Field:	SecTwpS. R E W
Number of Acres attributable to well:	18 Section. Negulai of Integulai
envenvenvem or doreage.	If Section is Irregular, locate well from nearest corner boundary. Section corner used: NE NW SE SW
lease roads, tank batteries, pipelines and electrical line	PLAT nearest lease or unit boundary line. Show the predicted locations of es, as required by the Kansas Surface Owner Notice Act (House Bill 2032). attach a separate plat if desired.
	LEGEND
	O Well Location Tank Battery Location Pipeline Location
	Electric Line Location Lease Road Location
	EXAMPLE :
10	
	1980' FSL
178 ft. ——	SEWARD CO. 3390' FEL

200 ft.

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: Emergency Pit Burn Pit Settling Pit Drilling Pit Workover Pit Haul-Off Pit (If WP Supply API No. or Year Drilled)	Pit is: Proposed Existing If Existing, date constructed: Pit capacity:		SecTwpR East WestFeet from North / South Line of SectionFeet 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?	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		
material, thickness and installation procedure.					
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: 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: Il utilized in drilling/workover: xing 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 Numl	ber:	Permi	t Date: Lease Inspection: Yes No		



1207879

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

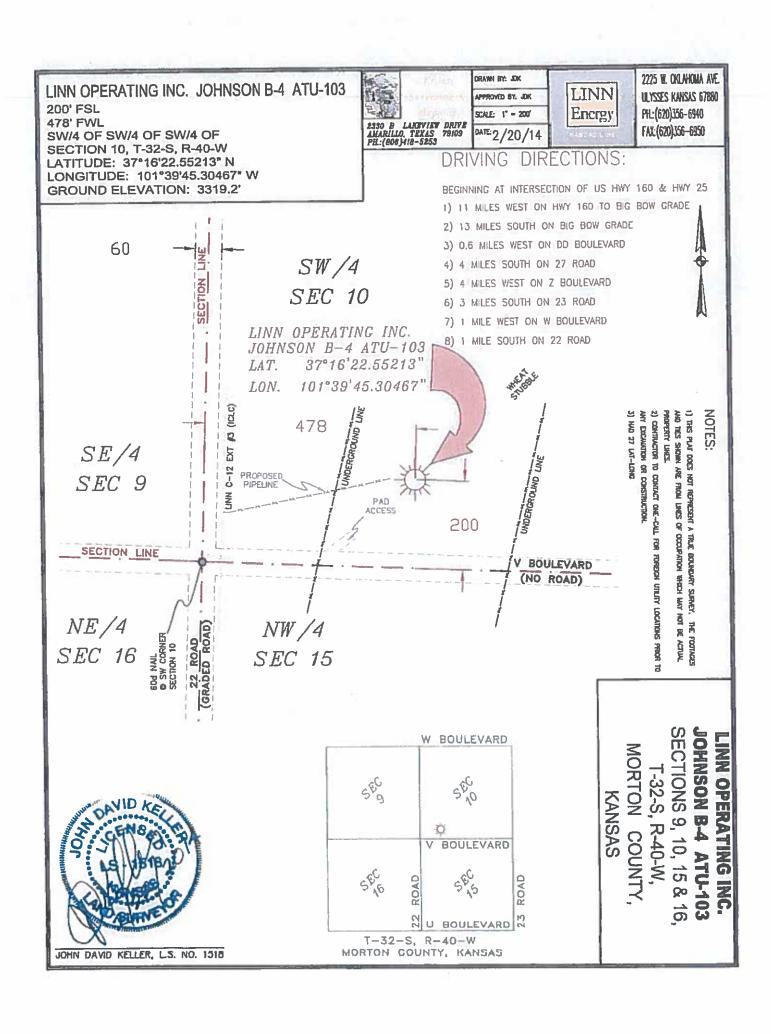
CERTIFICATION OF COMPLIANCE WITH THE KANSAS SURFACE OWNER NOTIFICATION ACT

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:	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:			
Contact Person:				
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:	county, and in the real estate property tax records of the county treasurer.			
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				



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 NUM	BER 15			· · · · · · · · · · · · · · · · · · ·	TOOMTON (OF WELL: COUNTY _	Morton
LEASE	R LINN Or Johnson MBER B-4	Ç		nc.	200 S fe	et from south/no	orth line of section
	MBER <u>B-4</u> Jugoton-Pa				<u> </u>		
EIETD T	iugocon-re				SECTION	10 TWP 32	(5) RG 40W E/W
QTR/QTR	OF ACRES AT	EAGE	SW	sw _ sw	IS SECTIO IF SECTIO NEAREST C Section contable ac	N X REGULAR ON IS IRREGULAR, ORNER BOUNDARY. Orner used:N reage for prorat	IRREGULAR LOCATE WELL FROM (check line below) E NW SE SW ed or spaced wells).
(Show t	he footage	to the n	earest	lease or unit	boundary 1	ine; and show to	otage to the nearest
common	source sup	pply wel	.1).				
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T	he undersig	ned here	by cert	ifies as Re	equlatory	Compliance A	dvisor (title) for
]	LINN Opera	ating,	Inc.		(Co.), a duly auth	orized agent, that all
inform	ation shown	hereon	is tru	e and correct	to the best	of my knowledge	and belief, that all
	a claimed a	ttribut	able to	o the well nam	med herein	is held by produ	ICCIOU ILOW CUSC METT
and he	reby make a	applicat	ion fo	r an allowable	e to be ase	ilgned to the we	ll upon the filing of
this f	orm and the	State	test,	whichever is			20 80
				Sign	ature	ran Hr	editor
Subscr	ibed and sw	orn to b	pefore :	me on this	29th day o	f May	, 19 2014
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Му Сол	mission exp	pire	AT PURE	MINDY POTOR	Toyon	Notary	Public FORM CG-8 (12/94)
			Antidential Co.	ommission Expires 02-	EU.		

