

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

#### KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1209603

Form C-1

March 2010

Form must be Typed

Form must be Signed

All blanks must be Filled

### NOTICE OF INTENT TO DRILL

	e (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
	(Q/Q/Q/Q) feet from N / S Line of Section
OPERATOR: License#	feet from E / W Line of Section
Name:	Is SECTION: Regular Irregular?
Address 1:Address 2:	
City: State: Zip: +	(Note: Locate well on the Section Plat on reverse side)
Contact Person:	County
Phone:	Lease Name: Well #:
CONTRACTOR	Field Name:
CONTRACTOR: License#	is the a related repair in a.
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:
If OWWO: old well information as follows:	Surface Pipe by Alternate: III
II 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:	
D: (: 1 D : (	Water Source for Drilling Operations:
Directional, Deviated or Horizontal wellbore?  Yes No	Well Farm Pond Other:
If Yes, true vertical depth:	David office.
KCC DKT #:	(Note: Apply for Permit with DWR )
	vviii Cores de takeit?
	If Yes, proposed zone:
AF	FIDAVIT
The undersigned hereby affirms that the drilling, completion and eventual p	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 <i>prior</i> to spudding of well:	
<ol> <li>A copy of the approved notice of intent to drill <i>shall be</i> posted on each</li> </ol>	h drilling rig;
3. 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> ;
<ol> <li>The appropriate district office will be notified before well is either plug</li> <li>If an ALTERNATE IL COMPLETION, production pipe shall be cement</li> </ol>	ged or production casing is certificatin, ed from below any usable water to surface within <b>120 DAYS</b> 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	e plugged. In all cases, NOTIFY district office prior to any cementing.
Submitted Electronically	
	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;
	- File Completion Form ACO-1 within 120 days of spud date;
Minimum surface pipe requiredfeet per ALTIII	- File acreage attribution plat according to field proration orders;
Approved by:	Notify appropriate district office 48 hours prior to workover or re-entry;  Submit all prior separat (CR 4) after all prior to workover or re-entry;
This authorization expires:	<ul> <li>Submit plugging report (CP-4) after plugging is completed (within 60 days);</li> <li>Obtain written approval before disposing or injecting salt water.</li> </ul>
(This authorization void if drilling not started within 12 months of approval date.)	If well will not be drilled or permit has expired (See: authorized expiration date)

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

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:	



For KCC Use ONLY	
API # 15	

#### IN ALL CASES PLOT THE INTENDED WELL ON THE PLAT BELOW

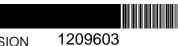
In all cases, please fully complete this side of the form. Include items 1 through 5 at the bottom of this page.

Operator: _							_ Loc	cation of W	/ell: County:		
Lease:				feet from N / S Line of Section							
Well Number:							feet from E / W Line of Section				
Field:						Sec Twp S. R E W					
Number of QTR/QTR/							- IS 3	Section:	Regular or Irregular		
		Ü						estion is	Irregular, locate well from nearest corner boundary.		
							Se	ction corne	er used: NE NW SE SW		
							PLAT				
					_				dary line. Show the predicted locations of		
	lease roa	ads, tank ba	atteries, pi	pelines and					as Surface Owner Notice Act (House Bill 2032).		
	23	10 ft.			You m	ay attach a	a separate	plat if desi	ired.		
		10 11.									
		:	:			:	:	:			
		:	:				:		LEGEND		
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					*******		:		O Well Location		
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		:		:		:	:	•	Pipeline Location		
					•••••				•		
		:		:		:	:	:	Electric Line Location		
		:	• • •			:	:		Lease Road 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  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		
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  Number of work  Abandonment p	ver and Haul-Off Pits ONLY:  Il utilized in drilling/workover:  king pits to be utilized:  procedure:		
flow into the pit? Yes No Drill pits must be closed within 365 days of spud date.  Submitted Electronically					
	КСС	OFFICE USE O	NLY Liner Steel Pit RFAC RFAS		
Date Received: Permit Numl	ber:	Permi	t Date: Lease Inspection: Yes No		



1209603

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: State: Zip:+	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:	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 tax records of the county treasurer.				
City: State: Zip:+					
	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.				
<ul> <li>□ 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 form; and 3) my operator name, address, phone number, fax, and I have not provided this information to the surface owner(s). It is KCC will be required to send this information to the surface owner.</li> </ul>	acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this				
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	g fee with this form. If the fee is not received with this form, the KSONA-1				
form and the associated Form C-1, Form CB-1, Form T-1, or Form CP	'-1 will be returned.				
Submitted Electronically					
I and the second					



# **Fall & Associates**

Stake and Elevation Service 719 W. 5° Street P.O. Box 404 Concordia, KS. 66901 1-800-536-2821

5-28-14 Date 0522141 Invoice Number 1-6 Landenburger MURFIN DRILLING Farm Name Number Operator 2310'FNL 330'FWL 35w Rawlins-KS Location County-State 3205 Gr. Elevation Murfin Drilling 250 N. Water Ordered By:\_\_\_\_ Shauna Suite 300 Wichita, KS. 67202 Scale 1"=1000" Stake 6 Set 6' wood stake on level wheat stubble.

