

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

1212520

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  |  |
| DPERATOR: License#  | feet from N / S Line of Section  |
| lame:   | feet from E / W Line of Section  |
| Address 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:  |
| ONTRACTOR: 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 OWNED, and well information as follows:  | 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:  |
| Directional, Deviated or Horizontal wellbore?   | Water Source for Drilling Operations:  |
| Directional, Deviated or Horizontal wellbore? Yes No  Yes, true vertical depth:   | Well Farm Pond Other:  |
| Bottom Hole Location:   | DWR Permit #:(Note: Apply for Permit with DWR )  |
| ottom Floid Eddatom.  | ( <b>Note:</b> Apply for Permit with DWR    )  |
| (CC DKT #:  |  |
| (CC DKT #:  | Will Cores be taken?   |
| CCC DKT #:  |  |
| AFF   | Will Cores be taken? Yes If Yes, proposed zone:  |
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SEWARD CO. 3390' FEL

1980' FSL

| 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: \_\_

| Lease:      |                                    |             |            |    |           |                  | teet from N / S Line of Section  |  |  |  |  |
|-------------|------------------------------------|-------------|------------|----|-----------|------------------|--|--|--|--|--|
| Well Number | er:                                |             |            |    |           |                  | feet from E / W Line of Section  |  |  |  |  |
| Field:      |                                    |             |            |    |           | SecTwpS. R E     |  |  |  |  |  |
|             | Acres attributab<br>QTR/QTR of acr |             |            |    |           | Is Section:      | : Regular or Irregular   |  |  |  |  |
|             |                                    |             |            |    |           |                  | is Irregular, locate well from nearest corner boundary.  orner used: NE NW SE SW                   |  |  |  |  |
|             |                                    |             |            |    | PL        |                  |  |  |  |  |  |
|             |                                    |             |            | •  |           |                  | oundary line. Show the predicted locations of<br>ansas Surface Owner Notice Act (House Bill 2032). |  |  |  |  |
|             | lease roads, tai                   | ik ballerie | 1485 ft.   |    |           | parate plat if c | •  |  |  |  |  |
|             |                                    | :           |            | :  | :         | :                | LEGEND   |  |  |  |  |
|             |                                    |             |            |    | ····· ··· |                  | Well Location     Tank Battery Location     Pipeline Location                                      |  |  |  |  |
| 1815 ft     |                                    |             | <b>-</b> Ф |    |           |                  | Electric Line Location Lease Road Location   |  |  |  |  |
|             |                                    |             | <u></u>    |    | :         | :<br>:<br>:<br>: | EXAMPLE : : : : : : : : : : : : : : : : : : :  |  |  |  |  |
|             |                                    |             | 2          | 26 |           |                  |  |  |  |  |  |

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              | Drilling Pit  Haul-Off Pit Pit capacity: (bbls) |                                    | 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?  Artificial Liner?  Yes No Yes No  |   | 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<br>Source of infor | west fresh water feet.<br>mation:   |  |  |  |
| 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:   |  |  |  |
| flow into the pit? Yes No  Submitted Electronically  |   | '                                  | e closed within 365 days of spud date.  |  |  |  |
|  | KCC   | OFFICE USE O                       | NLY  Liner Steel Pit RFAC RFAS  |  |  |  |
| Date Received: Permit Num  | ber:  | Permi                              | t Date: Lease Inspection: Yes No  |  |  |  |



1212520

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:  | When filing a Form T-1 involving multiple surface owners, attach an additional  |
| 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 |   |

| WL  | 1/5   | 495    | 8            | 15     | 1155        |                 | 495                     | 1915   | F |
|-----|---|--------|--------------|--------|-------------|-----------------|-------------------------|--------|---|
|     | 10-   | 16-27g | 1 3          | (2-13  | K/Z -1      | 7               | 502-20<br>0<br>50<br>50 | 1/2-3  | 1 |
|     | · 569=  | -1     | 542 -5<br>5  | 5      | XZI         | SCZ I-          | X                       | 5/2-23 |   |
| 9   | (Z-1  | 562-1  |              | CZ-14  | 562-1       | 5/2 1**         | 92-21<br>0              | 1-9    | 1 |
|     | * 44  | 1-3    | XZZZ         | 7      | 2 T-14      | X               | X                       | SCZ-44 |   |
| 5   | (Z-)  | 562-1  | 3            | 2-15   | (Z I-1)     | 9<br>5(Z I - 19 | 82 - 22<br>8 563        |        | - |
|     | 3%  | I-3    | 522 I 7<br>X |        | X           | X               | X                       | 6Z2-25 | - |
|     | S(z-8   | 5(2-14 | 5            | LZ-14  | 362         | 5CZ I-V         | •                       | 1-20   |   |
| 000 | THE RESERVE AND ADDRESS OF THE PARTY OF THE | I-4    | SLZIF        | 3      | X 1-1 X     | X               | X                       |        |   |
|     | 5CZ - 26  | 5CZ-3  |              | 162-34 | 662-        |                 | 62-44                   | 562-76 | - |
|     | •   | 1-21   | 502220<br>X  |        | X 2 2 2 2 7 | 5(Z I-10)       | \$03<br>X               | T-D    | - |
|     | 5(Z) 27   | 562-3  |              | 162-35 | 952-        |                 | 6/2-43<br>0             | 642-47 |   |
|     | •   | •      | 5(232        | 3      | (Z I - 20)  | 502 2-31        | 50<br>X                 | 21-5   | - |
|     | X   | Z I-97 | X            | 5CZ-3  | 662         | -40             | 562-44                  | 662-48 |   |
|     | 562 -38   | 562-3  |              | 6      | (Z Z-37)    | 562.7-3)        | •                       | 274    |   |
|     | 50<br>X   | 2 1-23 | 562 I-34     | 1      |             | X               | X                       |        |   |
|     | 562 tan   | 5[2-   | 3            | 5CZ-*  | 662         | -41             | 562-43                  | 10-3   |   |

M - Tank Battery

<sup>- -</sup> Production line, electrical line

<sup>· -</sup> Production well

X - Injection woll

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

July 08, 2014

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

Re: Drilling Pit Application BAKER SCZ-46 NW/4 Sec.26-18S-22E Miami 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.