

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

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

1214835

Form C-1

March 2010

Form must be Typed

Form must be Signed

All blanks must be Filled

### NOTICE OF INTENT TO DRILL

Marker   Section   Secti	Expected Spud Date:	Spot Description:			
Contact Person:   State:   Zip:   +     County:   Lease Name:   Well #   Will form the Section Plat on revenue side)	month day year	Sec Twp S. R F W			
Name:  Address 1:  Address 2:  City: State: Zip: County:  Contact Person: Phone:  Floor Branch Control Person: Well Ziss:  Well Drilled For: Well Class: Type Equipment:  Is a Forated / Spaced Field?  Target Formation(s):  Name: Well Drilled For: Well Class: Type Equipment:  Gas State: All Rotary  Disagonal Wildcat Cable  Sesimic; of Holes Other  Opher:  Well Name: Opherator:  Well Name: Original Total Depth:  Directional, Deviated or Horizontal wellbore?  Well Yes Insurance Pipe Branned to be set:  Length of Surface Pipe Branned to be set:  Length of Conductor Pipe (if any):  Projected Total Depth:  Formation at Total Depth:  Water supply well opherator:  Well Name: Original Total Depth:  Directional, Deviated or Horizontal wellbore?  If Yes David the Apply for Permit with DWR   Well or Surface Pipe Parmet to be set:  Length of Conductor Pipe (if any):  Well Farm Pond   Other:  Water Source for Drilling Operations:  Water Source for Drilling Operations:  Water Source for Drilling Operations:  Well Farm Pond   Other:  AFFIDAVIT  The undersigned hereby affirms that the drilling, completion and eventual plugging of this well will comply with K.S.A. 55 et. seq.  It is a greated that the following minimum requirements will be met:  1. Notify the appropriate district office prior to spudding of well:  2. A copy of the approved notice of inent to drill shall be person on each drilling rig:  3. A copy of the appropriate district office will be notified before well is either plugged or production casing is cemented in:  4. If the well is dry hole, an agreement between the operator and the district office or plug length and placement is necessary prior to plugging;  5. The appropriate district office will be notified before well is either plugged or production casing is cemented in:  6. If an ALTERNATE II COMPLETION, production pipe shall be seemented from the or plug length and placement is necessary prior	OPERATOR: License#	(0/0/0/0)			
Address 2:  City:		feet from E / W Line of Section			
Address 2:		Is SECTION: Regular Irregular?			
County: State: Zip: + County: Lease Name: Woll #: Phone: Bhone: Woll #: County: Lease Name: Woll #: Phone: Well Criass: Type Equipment: Is this a Prorated / Spaced Field? Target Formation(s): Name: Well Drilled For: Well Class: Type Equipment: Is this a Prorated / Spaced Field? Target Formation(s): Name: Is the Prorated / Spaced Field? Target Formation(s): Name: Is this a Prorated / Spaced Field? Target Formation(s): Name: Is this a Prorated / Spaced Field? Target Formation(s): Name: Is this a Prorated / Spaced Field? Target Formation(s): Name: Is the Prorated Field Prorated Field Prorated Field Prorated Field Pr		(Nata: Locata wall on the Section Plat on reverse side)			
Contract Person:	City: State: Zip: +	•			
Filed Name:    State   Section   Sec	Contact Person:				
Is this a Prorated / Spaced Field?	Phone:				
Name:    Well Drilled For:   Well Class:   Type Equipment:   Nearest Lease or unit boundary line (in footage):   Ground Sufface Elevation:   Second Sufface Plaps by Alternate:   Second Sufface Plaps by Alternate:   Second Sufface Plaps Planned to be set:   Second Sufface Plaps by Alternate:   Second Sufface Plaps Planned to be set:   Second Sufface Plaps by Alternate:   Second Sufface Plaps Planned to be set:   Second Sufface Planned	CONTRACTOR: License#				
Well Drilled For:   Well Class:   Type Equipment:   Groundary line (in footage):   Ground Surface Elevation:   feet   f		is the different operation.			
Ground Surface Elevation:   fee   Grou	W # D # 4 E				
Gals   Storage   Pool Ext.   Air Rotny   Saismic ; # of Holes   Pool Ext.   Air Rotny   Public water supply well within one-quarter mile:   Yes   Public water supply well within one-mile:   Yes   Depth to bottom of fresh water:   Depth to bottom of usable water:   Depth to Public water supply well within one-mile:   Yes   Depth to Dept	Well Drilled For: Well Class: lype Equipment:	• • • • • • • • • • • • • • • • • • • •			
Gas   Slorage   Pool EXI.   Cable   Pool EXI.   Cable   Seismic;   \$\pi\$ of Holes   Other   Cable   Other   Depth to bottom of Iresh water:   Depth to bottom of Iresh water:   Depth to bottom of Iresh water:   Depth to Soutom of Iresh water:   Surface Pipe by Alternate:   I   II   Length of Surface Pipe Planned to be set:   Length of Surface Pipe Planned to Depth:   Projected Total Depth:					
Selsmic: # of Holes   Other					
Depth to bottom of usable water:   Surface Pipe by Alternate:   I   I   Length of Surface Pipe by Alternate:   I   Length of Surface Pipe Pipe by Alternate:   I   Length of Conductor Pipe (if any):   Projected Total Depth:   Projected Total D					
Surface Pipe by Alternate:		·			
Length of Surface Pipe Planned to be set: Length of Surface Pipe Planned to be set: Length of Conductor Pipe (if any): Projected Total Depth: Profected Total Depth: Profected Total Depth: Water Source for Drilling Operations: Water Source for Drilling Operatio	Other				
Operator: Well Name: Original Completion Date: Original Total Depth: Formation at Total Depth: Formation at Total Depth: Formation at Total Depth: Water Source for Drilling Operations: DWR Permit #:  Water Source for Drilling Operations: DWR Ca	If OWWO: old well information as follows:				
Well Name: Original Completion Date: Original Total Depth: Directional, Deviated or Horizontal wellbore? Water Source for Drilling Operations: Water Source for Drilling Operations. Wat	Operatory	•			
Pormation at Total Depth:    Directional, Deviated or Horizontal wellbore?   Yes   No	•	P. S. A. T. A. D. W.			
Water Source for Drilling Operations:   Water Source Sour		-			
Well   Farm Pond   Other:   DWR Permit #:   DWR Permit with DWR   DWR Permit with DWR Permit with DWR   DWR Permit with DWR Permit wit	Original Completion Bato.				
If Yes, true vertical depth:  Bottom Hole Location:  KCC DKT #:  Will Cores be taken?  If Yes, proposed zone:  AFFIDAVIT  The undersigned hereby affirms that the drilling, completion and eventual plugging of this well will comply with K.S.A. 55 et. seq.  It is agreed that the following minimum requirements will be met:  1. Notify the appropriate district office prior to spudding of well;  2. A copy of the approved notice of intent to drill shall be posted on each drilling rig;  3. The minimum amount of surface pipe as specified below shall be set by circulating cement to the top; in all cases surface pipe shall be set through all unconsolidated materials plus a minimum of 20 feet into the underlying formation.  4. If the well is dry hole, an agreement between the operator and the district office on plug length and placement is necessary prior to plugging;  5. The appropriate district office will be notified before well is either plugged or production casing is cemented in;  6. If an ALTERNATE II COMPLETION, production pipe shall be cemented from below any usable water to surface within 120 DAYS of spud date.  Or pursuant to Appendix "B" - Eastern Kansas surface casing order #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 be plugged. In all cases, NOTIFY district office prior to any cementing.  Submittled Electronically  Remember to:  - File Compliance with the Kansas Surface Owner Notification Act (KSONA-1) with Intent to Drill;  - File Drill Pit Application (form CDP-1) with Intent to Drill;  - File Drill Pit Application (form CDP-1) with Intent to Drill;  - File Compliance prof (CP-4) after plugging is completed within 60 days!  - Submit long pend (CP-4) after plugging is completed within 60 days!  - Submit long pend (CP-4) after plugging is completed within 60 days!	Directional, Deviated or Horizontal wellbore?				
Will Cores be taken?	If Yes, true vertical depth:	— — — — — — — — — — — — — — — — — — —			
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For KCC Use ONLY  API # 15	<ol> <li>A copy of the approved notice of intent to drill shall be posted on each 3. The minimum amount of surface pipe as specified below shall be see through all unconsolidated materials plus a minimum of 20 feet into the second of the well is dry hole, an agreement between the operator and the district office will be notified before well is either pluge.</li> <li>If an ALTERNATE II COMPLETION, production pipe shall be cement Or pursuant to Appendix "B" - Eastern Kansas surface casing order #</li> </ol>	t by circulating cement to the top; in all cases surface pipe shall be set ne underlying formation.  Strict office on plug length and placement is necessary prior to plugging; aged or production casing is cemented in; and 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			
For KCC Use ONLY  API # 15	Submitted Electronically				
- File Certification of Compliance with the Kansas Surface Owner Notification API # 15	For KCC Use ONLY				
Conductor pipe required	ADI # 15 -	·			
Conductor pipe required					
Approved by:					
- Suhmit plugging report (CP-4) after plugging is completed (within 60 days):	Minimum surface pipe required feet per ALT I II	- File acreage attribution plat according to field proration orders;			
This authorization expires:  - Submit plugging report (CP-4) after plugging is completed (within 60 days);	Approved by:	=   ' ' ' ' '			
This authorization expires:  - Obtain written approval before disposing or injecting salt water.	This authorization expires:				

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

Agent:

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.

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

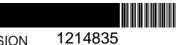
In all cases, please fully complete this side of the form. Include items 1 through 5 at the bottom of this page.

Operator: Lease: Well Number:								Location of Well: County:		
									feet from N / S Line of Section	
								feet from E / W Line of Section		
Field:			_ Se	SecTwpS. R 🔲 E 🔲 W						
							13	Section:	Regular or Irregular	
									Irregular, locate well from nearest corner boundary. er used: NE NW SE SW	
		ads, tank b			d electrica	l lines, as	required l		dary line. Show the predicted locations of sas Surface Owner Notice Act (House Bill 2032). ired.	
180 ft.	-6	: :	:	:		:	:	:	LEGEND	
		:	:	:		:	:	:	LEGEND	
		:	:	:		:	:	:	O Well Location	
		:	:	:		:	:	:	Tank Battery Location	
				•				•	Pipeline Location	
		:	:	:		:	:	:	Electric Line Location	
		:	:	:		:	:	:	Lease Road Location	
			•	•				•		
		:	:	•		:	:	:		
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		:	:	:		:	:	:		
		:	:	:		:	:	:	SEWARD CO. 3390' FEL	
		•	•	•		•	•	•		

#### 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.

NOTE: In all cases locate the spot of the proposed drilling locaton.



## 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)  Is the pit located in a Sensitive Ground Water A	Pit is:  Proposed Existing  If Existing, date constructed:  Pit capacity:  (bbls)  Area? Yes No		SecTwpR East WestFeet from North / South Line of SectionFeet from East / West Line of SectionCounty  Chloride concentration: mg/l  (For Emergency Pits and Settling Pits only)	
Is the bottom below ground level?  Yes No	Artificial Liner?	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 Source of infor	west fresh water feet. 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:		Type of materia	over and Haul-Off Pits ONLY:  all utilized in drilling/workover:  king pits to be utilized:  procedure:	
Does the slope from the tank battery allow all spilled fluids to flow into the pit? Yes No		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	ber:	Permi	t Date: Lease Inspection:  Yes No	



1214835

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

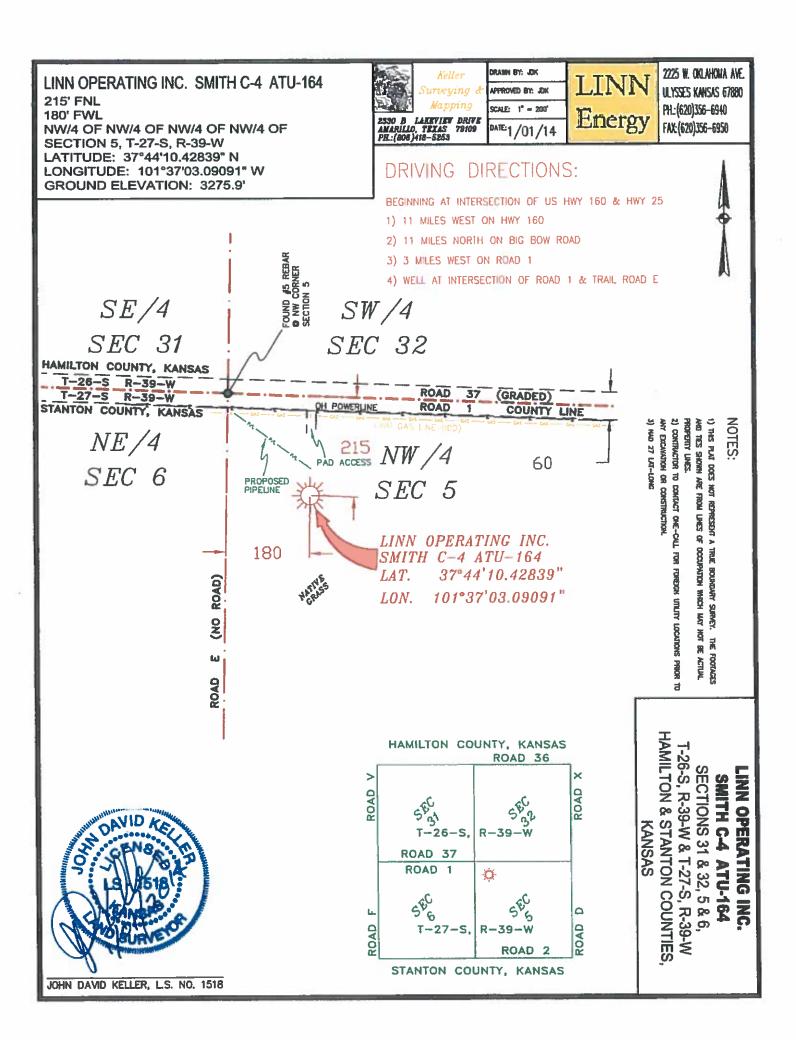
# CERTIFICATION OF COMPLIANCE WITH THE KANSAS SURFACE OWNER NOTIFICATION ACT

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 found in the records of the register of deeds for the				
Address 2:					
City:					
	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.				
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,					
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 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 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

OPERATOR LINN Operating, Inc.  LEASE Smith  WELL NUMBER C-4 ATU-164  FIELD Hugoton-Panoma  NUMBER OF ACRES ATTRIBUTABLE TO WELL 640  QTR/QTR/QTR OF ACREAGE NW NW NW NW NW  (Show the location of the well and shade attri  (Show the footage to the nearest lease or unit  common source supply well).	LOCATION OF WELL: COUNTY Hamilton  215 N feet from south/north line of section  180 W feet from east / west line of section  SECTION 5 TWP 27 (S) RG 39W E/W  IS SECTION X REGULAR or IRREGULAR  IF SECTION IS IRREGULAR, LOCATE WELL FROM  NEAREST CORNER BOUNDARY. (check line below)  Section corner used: NE NW SE SW  ibutable acreage for prorated or spaced wells).  boundary line; and show footage to the nearest
	EXAMPLE : 1980 : 3390'
LINN Operating, Inc.  information shown hereon is true and correct acreage claimed attributable to the well na and hereby make application for an allowabl this form and the State test, whichever is	17th day of July , 19 2014  Poly CG-8 (12/94)

