

Well will not be drilled or Permit Expired Date: \_

Signature of Operator or Agent:

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

## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

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:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    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SEWARD CO. 3390' FEL

| For KCC Use ONLY |   |
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| API # 15         | - |

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

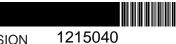
In all cases, please fully complete this side of the form. Include items 1 through 5 at the bottom of this page.

| Operator:         |       |              |        |   |       |   | _ Lo       | cation of W                           | Vell: County:                                                                              |  |
|-------------------|-------|--------------|--------|---|-------|---|------------|---------------------------------------|--------------------------------------------------------------------------------------------|--|
|                   |       |              |        |   |       |   |            |                                       | feet from N / S Line of Section                                                            |  |
| Well Numb         | oer:  |              |        |   |       |   |            |                                       | feet from E / W Line of Section                                                            |  |
| Field:            |       |              |        |   |       |   | Se         | c                                     | Twp S. R                                                                                   |  |
| Number of QTR/QTR |       |              |        |   |       |   | – Is :     | Section:                              | Regular or Irregular                                                                       |  |
|                   |       |              |        |   |       |   |            |                                       | Irregular, locate well from nearest corner boundary.                                       |  |
|                   |       |              |        |   |       |   | Se         | ction corne                           | er used: NE NW SE SW                                                                       |  |
|                   |       |              |        |   |       |   |            |                                       |                                                                                            |  |
|                   |       |              | 6.4    |   |       |   | PLAT       |                                       |                                                                                            |  |
|                   |       |              |        |   | _     |   |            |                                       | dary line. Show the predicted locations of sas Surface Owner Notice Act (House Bill 2032). |  |
|                   |       | 2238         |        | , |       |   | a separate |                                       |                                                                                            |  |
|                   |       | :            | :      | : |       | : | ;          | <b>:</b>                              | ]                                                                                          |  |
|                   |       | :            | :      | : |       | : | :          | •                                     | LEGEND                                                                                     |  |
|                   |       | :            | :      | : |       | : | :          |                                       | LEGEND                                                                                     |  |
|                   |       | :            |        | : |       | : | :          | :                                     | O Well Location                                                                            |  |
|                   |       | :            | :      | : |       | : | :          | •                                     | Tank Battery Location                                                                      |  |
|                   |       | ` . <b>.</b> |        |   | ••••  |   |            |                                       | Pipeline Location                                                                          |  |
|                   |       | :            | :<br>: | : |       | : | :          | •<br>•                                | Electric Line Location                                                                     |  |
|                   |       | :            | :<br>: | : |       | : | :          | :<br>:                                | Lease Road Location                                                                        |  |
| 205 (1            | ••••  | :            | :      | : | ••••• | : | :          | :                                     |                                                                                            |  |
| 835 ft.           |       | <del>.</del> |        | : |       | : |            | •                                     | EXAMPLE : :                                                                                |  |
|                   |       | :            | :      | : |       | : | :          | :                                     |                                                                                            |  |
|                   |       | :            | :<br>: | 3 |       | : | :          |                                       |                                                                                            |  |
|                   |       | :            |        | : |       | : | <u>:</u>   |                                       |                                                                                            |  |
|                   | ••••• |              |        |   | ••••• |   | :          | · · · · · · · · · · · · · · · · · · · |                                                                                            |  |
|                   |       |              |        | : |       |   |            |                                       |                                                                                            |  |
|                   |       | :            | :      | : |       | : | :          | :                                     | : <u>_</u> : :                                                                             |  |
|                   |       | :            | :      | : |       | : | :          | :                                     | 0-1 1980' FSL                                                                              |  |
|                   |       |              |        | • |       | • | :          |                                       |                                                                                            |  |
|                   |       |              |        | • |       |   | :          |                                       |                                                                                            |  |
|                   |       | :            |        | : |       | : | :          | :                                     |                                                                                            |  |

#### 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              | Pit is:  Proposed Existing  If Existing, date constructed:  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 mg/l reference from reference from mg/l mg/l mg/l reference from reference from mg/l reference from reference from mg/l reference from |  |  |
| 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<br>Source of infor | west fresh water feet.<br>mation:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |  |
| feet Depth of water wellfeet                                                                                                                                                           |                                                                                   | 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 Drill pits must be closed within 365 days of spud date.  Submitted Electronically                                                                            |                                                                                   |                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |  |
| KCC OFFICE USE ONLY                                                                                                                                                                    |                                                                                   |                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |  |
| Date Received: Permit Num                                                                                                                                                              | ber:                                                                              | Permi                              | t Date: Lease Inspection: Yes No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |  |



1215040

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<br>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: State: Zip:+                                                                                                                     |                                                                                                                                                                                                                                                           |  |  |  |  |
| are preliminary non-binding estimates. The locations may be entered                                                                    | nk batteries, pipelines, and electrical lines. The locations shown on the plat<br>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<br>P-1 will be returned.                                                                                                                                                     |  |  |  |  |
| Submitted Electronically                                                                                                               |                                                                                                                                                                                                                                                           |  |  |  |  |
| I                                                                                                                                      |                                                                                                                                                                                                                                                           |  |  |  |  |

For KCC Use ONLY

API # 15 - 15-109-21269-00-00

#### 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: Raymond Oil Company, Inc.  Lease: Michaelis  Well Number: 3  Field: Rose Garden West                                                         | Location of Well: County: Logan  2238 feet from N / S Line of Section  835 feet from E / X W Line of Section  Sec. 3 Twp. 14 S. R. 32 E X W             |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|
| Number of Acres attributable to well:  QTR/QTR/QTR/QTR of acreage: NW SE5W NW                                                                          | Is Section: Regular or Irregular  If Section is Irregular, locate well from nearest corner boundary.  Section corner used: NE NW SE SW                  |
| Show location of the well. Show footage to the nearest lease roads, tank batteries, pipelines and electrical lines, as required.  You may attach a sep | ase or unit boundary line. Show the predicted locations of<br>ired by the Kansas Surface Owner Notice Act (House Bill 2032).<br>parate plat if desired. |
| 2238  existing  existing  ported Live                                                                                                                  | Tonk butt 5  LEGEND  O Well Location  Tank Battery Location  Pipeline Location                                                                          |
| 17 ichaelis # 3                                                                                                                                        | EXAMPLE                                                                                                                                                 |
|                                                                                                                                                        | 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.

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).
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