

For KCC	Use:			
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:	Spot Description:
month day year	Sec Twp S. R
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:
Contact Person:	Lease Name: Well #:
Phone:	Field Name:
CONTRACTOR: License#	Is this a Prorated / Spaced Field?
Name:	Target Formation(s):
W # D # 4 F	Nearest Lease or unit boundary line (in footage):
Well Drilled For: Well Class: Type Equipment:	Ground Surface Elevation:feet MSL
Oil Enh Rec Infield Mud Rotary	Water well within one-quarter mile:
Gas Storage Pool Ext. Air Rotary	Public water supply well within one mile:  Yes No
Disposal Wildcat Cable	Depth to bottom of fresh water:
Seismic ;# of HolesOther	Depth to bottom of resh water:
Other:	Surface Pipe by Alternate: I II
If OWWO: old well information as follows:	Length of Surface Pipe Planned to be set:
<u> </u>	Length of Conductor Pipe (if any):
Operator:	
Well Name:	Projected Total Depth: Formation at Total Depth:
Original Completion Date: Original Total Depth:	•
Directional, Deviated or Horizontal wellbore?	Water Source for Drilling Operations:
If Yes, true vertical depth:	Well Farm Pond Other:
Bottom Hole Location:	DWR Permit #:(Note: Apply for Permit with DWR )
KCC DKT #:	Will Cores be taken?
	If Yes, proposed zone:
	II 163, proposed 2016
AFF	IDAVIT
The undersigned hereby affirms that the drilling, completion and eventual plu	gging of this well will comply with K.S.A. 55 et. seq.
It is agreed that the following minimum requirements will be met:	
<ol> <li>Notify the appropriate district office prior to spudding of well;</li> </ol>	
<ol> <li>A copy of the approved notice of intent to drill shall be posted on each</li> <li>The minimum amount of surface pipe as specified below shall be set through all unconsolidated materials plus a minimum of 20 feet into the</li> <li>If the well is dry hole, an agreement between the operator and the dist</li> <li>The appropriate district office will be notified before well is either plugg</li> <li>If an ALTERNATE II COMPLETION, production pipe shall be cemented.</li> <li>Or pursuant to Appendix "B" - Eastern Kansas surface casing order #1 must be completed within 30 days of the spud date or the well shall be</li> </ol>	by circulating cement to the top; in all cases surface pipe <b>shall be set</b> e underlying formation.  Thick office on plug length and placement is necessary <b>prior to plugging</b> ; and or production casing is cemented in; afform below any usable water to surface within <b>120 DAYS</b> of spud date.  33,891-C, which applies to the KCC District 3 area, alternate II cementing
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Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

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.

Date:
2

Side Two



For KCC Use ONLY	
API # 15	

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

	In all	cases, please	fully comple	ete this side of the	e form. Inclu	ude items 1	1 through 5 at the bottom of this page.			
Operator:					Loc	Location of Well: County:				
Lease:							feet from N / S Line of Section			
Well Number:							feet from E / W Line of Section			
Field:					Se	SecTwpS. R L E W				
Number of Acres attributable to well:					— Is S	Is Section: Regular or Irregular				
QTR/QTR/QTR/	QTR of acre	eage:								
						Section is	Irregular, locate well from nearest corner boundary. er used: NE NW SE SW			
					PLAT					
leas				-			dary line. Show the predicted locations of eas Surface Owner Notice Act (House Bill 2032).			
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	•••••						O Well Location			
					:	:	Tank Battery Location			
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				:	:	:	Electric Line Location			
	:			:	:	:	Lease Road Location			
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				:	:	: Y	SEWARD CO. 3390' FEL			

#### In plotting the proposed location of the well, you must show:

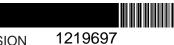
- 1. The manner in which you are using the depicted plat by identifying section lines, i.e. 1 section, 1 section with 8 surrounding sections, 4 sections, etc.
- $2. \ \, \text{The distance of the proposed drilling location from the south / north and east / west outside section lines}.$

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).

295 ft.

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)		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. 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	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 O	NLY  Liner Steel Pit RFAC RFAS		
Date Received: Permit Num	ber:	Permi	t Date: Lease Inspection: Yes No		



1219697

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

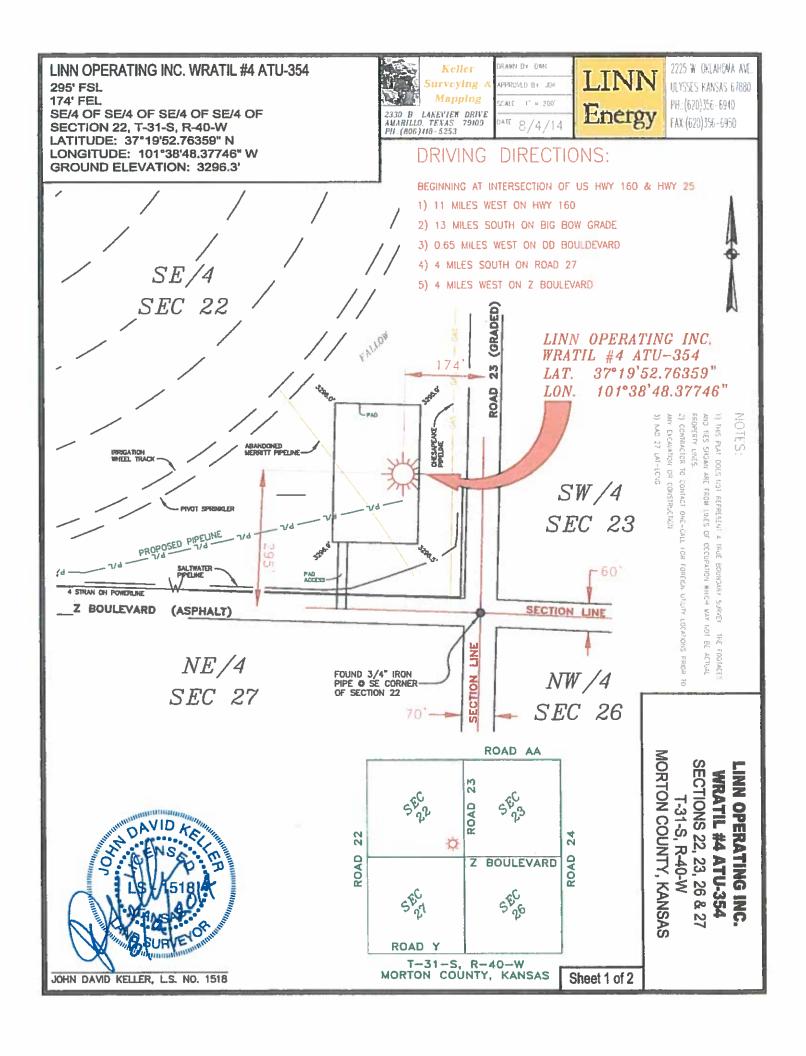
# CERTIFICATION OF COMPLIANCE WITH THE KANSAS SURFACE OWNER NOTIFICATION ACT

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 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				TOCKMION OF WELL	T . COIINTY	Morton	
OPERATOR Linn Operating, Inc.					LOCATION OF WELL: COUNTY Morton			
LEASE Wratil					295 S feet from south/north line of section			
WELL NUMBER 4 ATU-354					174 E feet from east / west line of section			
FIELD Hugoton-Panoma						•		
			<del></del>		SECTION 22	TWP31S	$_{\rm (s)}$ rg $^{40}$	W E/W
QTR/QTF (Show to (Show to	OF ACRES R/QTR OF A the location of the contagent of the	CREAGE on of t s to th	SE	SE _ SE	IS SECTION X IF SECTION IS I NEAREST CORNER Section corner butable acreage boundary line; a	IRREGULAR, BOUNDARY. used:N for prorate	LOCATE WELL (check line ENWSE ed or spaced	FROM below) SW wells).
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		_		ifies as Re	qulatory Comp	liance Ad	lvisor (ti	tle) for
1	Linn Ope	rating	g, Inc.		(Co.),	a duly autho	orized agent,	that all
inform	ation show	m here	on is tru	e and correct	to the best of my			
acreag	e claimed	attrib	outable to	the well nam	ed herein is hel	d by produ	ction from t	hat well
and he	reby make	applic	ation for	c an allowable	to be assigned	to the wel	l upon the f	iling of
this f	orm and t	he Stat	e test, v	whichever is l	ater.			
					Mar	Lin	1.00	
				Signa	ture Shaw	The	men	
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Subscr	ibed and s	sworn to	o before n	me on this	13th day of A	ugusu		9 2014
					All inda	WAS	41	
	(SEC			CONTRACTOR OF THE PARTY OF THE	1 U mill	Notary F	Public	
W	mission	PUPELLE STATE	MINDY	POTOR_	/	Hotarl P	FORM CG-8	(12/94)
wa com	WITSETOW C		<b>Notary Public</b>	; State of Toxas			. 0.101 00-0	(//
	N. A.		Commission E	cpires 02-19-2017				
				CANAL STATES				

