CORRECTION #1

| For KCC | Use: |
|------------|----------|
| Effective | Date: |
| District # | <u> </u> |
| 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: | month | day | 1/00" | Spot Description: |
|----------------------------------------------------|-----------------------|-----------------|-------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | montn | aay | year | (Q/Q/Q/Q) Sec Twp S. R [E [|
| OPERATOR: License# | | | | feet from N / S Line of Sec |
| lame: | | | | feet from E / W Line of Sec |
| ddress 1: | | | | Is SECTION: Regular Irregular? |
| address 2: | | | | (Note: Locate well on the Section Plat on reverse side) |
| City: | State: _ | Zip: | + | , |
| Contact Person: | | | | County: |
| Phone: | | | | Lease Name: Well #: |
| ONTRACTOR: Lierare | | | | Field Name: |
| CONTRACTOR: License# | 2 | | | Is this a Prorated / Spaced Field? |
| lame: | | | | Target Formation(s): |
| Well Drilled For: | Well Class | s: Typ | e Equipment: | Nearest Lease or unit boundary line (in footage): |
| Oil Enh | Rec Infield | d [| Mud Rotary | Ground Surface Elevation:feet M |
| Gas Stora | | _ | Air Rotary | Water well within one-quarter mile: |
| Dispo | | _ | Cable | Public water supply well within one mile: |
| Seismic ;# | | _ |] = = | Depth to bottom of fresh water: |
| Other: | | · | | Depth to bottom of usable water: |
| | | | | Surface Pipe by Alternate: I II |
| If OWWO: old well | information as fol | lows: | | Length of Surface Pipe Planned to be set: |
| Operator: | | | | Length of Conductor Pipe (if any): |
| Well Name: | | | | Projected Total Depth: |
| Original Completion D | | | | |
| Original Completion D | ate | . Original lota | г Берин. | Water Source for Drilling Operations: |
| Directional, Deviated or Ho | orizontal wellbore? | , | Yes No | Well Farm Pond Other: |
| f Yes, true vertical depth: _ | | | | — — — |
| Bottom Hole Location: | | | | DWR Permit #:(Note: Apply for Permit with DWR) |
| KCC DKT #: | | | | |
| | | | | If Yes, proposed zone: |
| | | | | ii res, proposed zone. |
| | | | AF | FIDAVIT |
| The undersigned hereby | affirms that the o | drilling, compl | etion and eventual p | ugging of this well will comply with K.S.A. 55 et. seq. |
| t is agreed that the follow | ving minimum red | quirements w | ill be met: | |
| Notify the appropri | ate district office | nrior to sour | dding of well: | |
| 2. A copy of the appr | | | | h drilling rig: |
| ., | | | • | 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; |
| 5. The appropriate di | strict office will be | e notified bef | ore well is either plug | ged or production casing is cemented in; |
| | | | | ed from below any usable water to surface within 120 DAYS of spud date. |
| | | | - U | 133,891-C, which applies to the KCC District 3 area, alternate II cementing |
| must be completed | d within 30 days o | of the spud da | ate or the well shall b | e plugged. In all cases, NOTIFY district office prior to any cementing. |
| | | | | |
| | | | | |
| ubmitted Electro | nically | | | |
| | | | | 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; |
| ALI# 10 " | | | | - File Drill Pit Application (form CDP-1) with Intent to Drill; |
| | | | | i i rippii dation (torin obi i i with intolit to biii, |
| Conductor pipe required | | | eet | - File Completion Form ACO-1 within 120 days of spud date: |
| Conductor pipe required Minimum surface pipe re | | | | File Completion Form ACO-1 within 120 days of spud date; File acreage attribution plat according to field proration orders; |
| | quired | fee | et per ALT. I III | File Completion Form ACO-1 within 120 days of spud date; File acreage attribution plat according to field proration orders; Notify appropriate district office 48 hours prior to workover or re-entry; |
| Minimum surface pipe re- | quired | fee | et per ALT. I III | - File acreage attribution plat according to field proration orders; |
| Minimum surface pipe re | quired | fee | et per ALT. IIIII | File acreage attribution plat according to field proration orders;Notify appropriate district office 48 hours prior to workover or re-entry; |

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

Spud 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

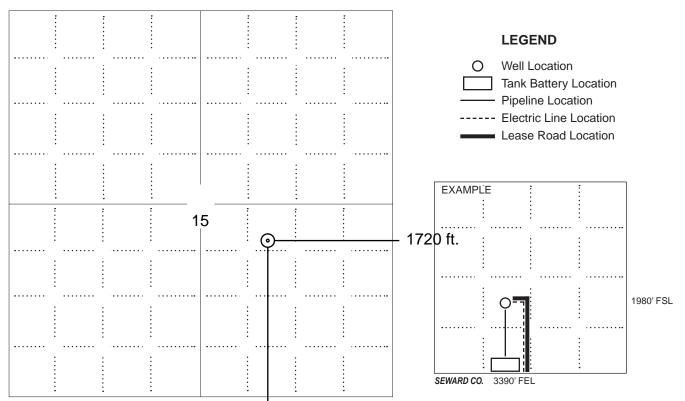
In all cases, please fully complete this side of the form. Include items 1 through 5 at the bottom of this page.

| Operator: | Location of Well: County: |
|---------------------------------------|------------------------------------------------------------------------------------------------------|
| Lease: | feet from N / S Line of Section |
| Well Number: | feet from E / W Line of Section |
| Field: | Sec Twp S. R |
| Number of Acres attributable to well: | Is Section: Regular or Irregular |
| | If Section is Irregular, locate well from nearest corner boundary. Section corner used: NE NW SE SW |

PLAT

Show location of the well. Show footage to the nearest lease or unit boundary line. Show the predicted locations of lease roads, tank batteries, pipelines and electrical lines, as required by the Kansas Surface Owner Notice Act (House Bill 2032).

You may attach a separate plat if desired.



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

2136 ft.

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.

CORRECTION #1 1221720

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 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: | | SecTwp R East WestFeet from Bast / West Line of SectionFeet from East / West Line of Section |
| | | (bbls) | County |
| Is the pit located in a Sensitive Ground Water A | Area? 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 |
| If the pit is lined give a brief description of the li material, thickness and installation procedure. | illei | | edures for periodic maintenance and determining ncluding any special monitoring. |
| Distance to nearest water well within one-mile of pit: | | Depth to shallowest fresh water feet. Source of information: | |
| feet Depth of water well | feet | measured | well owner electric log KDWR |
| Emergency, Settling and Burn Pits ONLY: | | Drilling, Work | over and Haul-Off Pits ONLY: |
| Producing Formation: | | Type of materia | al utilized in drilling/workover: |
| Number of producing wells on lease: | | Number of working pits to be utilized: | |
| Barrels of fluid produced daily: | | Abandonment | procedure: |
| Does the slope from the tank battery allow all s flow into the pit? Yes No | pilled fluids to | Drill pits must be closed within 365 days of spud date. | |
| Submitted Electronically | | | |
| | KCC | OFFICE USE O | |
| Date Received: Permit Num | ber: | Permi | Liner Steel Pit RFAC RFAS it Date: Lease Inspection: Yes No |

CORRECTION #1

Kansas Corporation Commission 1221720

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

OIL & GAS CONSERVATION DIVISION **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.

| Name: | OPERATOR: License # | Well Location: | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|--|--|
| Address 2: | Name: | | oS. R | | |
| City: State: Zip: + | Address 1: | County: | | | |
| Contact Person: | Address 2: | Lease Name: | Well #: | | |
| Contact Person: | City: State: Zip:+ | If filing a Form T-1 for multiple wells of | on a lease, enter the legal description of | | |
| Surface Owner Information: Name: | Contact Person: | the lease below: | | | |
| Surface Owner Information: Name: | Phone: () Fax: () | - | | | |
| Name: | Email Address: | - | | | |
| Address 1: | Surface Owner Information: | | | | |
| Address 1: | Name: | | | | |
| Address 2: | Address 1: | | | | |
| If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. Select one of the following: I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address. I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I must provide the name and address of the surface owner by filling out the top section of this form and that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form. If choosing the second option, submit payment of the \$30.00 handling 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. | Address 2: | and the second in the second sector as well as the second sector as a second sector in the second sector is a second sector in the second sector in the second sector is a second sector in the sector in the second sector in the second sector in the second sector in the second sector in the | | | |
| the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. Select one of the following: I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filling in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address. I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I must provide the name and address of the surface owner by filling out the top section of this form and that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form. If choosing the second option, submit payment of the \$30.00 handling 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. | City: State: Zip:+ | - | | | |
| CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address. I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I must provide the name and address of the surface owner by filling out the top section of this form and that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form. If choosing the second option, submit payment of the \$30.00 handling 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. | the KCC with a plat showing the predicted locations of lease roads, to are preliminary non-binding estimates. The locations may be entered Select one of the following: | ank batteries, pipelines, and electrical lin I on the Form C-1 plat, Form CB-1 plat, o Act (House Bill 2032), I have provided | es. The locations shown on the plat or a separate plat may be submitted. It is the following to the surface | | |
| KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I must provide the name and address of the surface owner by filling out the top section of this form and that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form. If choosing the second option, submit payment of the \$30.00 handling 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. | CP-1 that I am filing in connection with this form; 2) if the form | m being filed is a Form C-1 or Form CB | | | |
| form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be returned. | KCC will be required to send this information to the surface task, I acknowledge that I must provide the name and addre | owner(s). To mitigate the additional cosss of the surface owner by filling out the | st of the KCC performing this e top section of this form and | | |
| Submitted Electronically | | | ceived with this form, the KSONA-1 | | |
| | Submitted Electronically | | | | |

Summary of Changes

Lease Name and Number: Melanie 1 API/Permit #: 15-141-20470-00-00

Doc ID: 1221720

Correction Number: 1

Approved By: Rick Hestermann 09/05/2014

| Field Name | Previous Value | New Value |
|-----------------------------------------|-----------------------------------------------------------|-----------------------------------------------------------|
| Fresh Water Information Source: KDWR | Yes | No |
| KCC Only - Approved By | Rick Hestermann 08/27/2014 | Rick Hestermann 09/05/2014 |
| KCC Only - Approved Date | 08/27/2014 | 09/05/2014 |
| KCC Only - Date Received | 08/26/2014 | 09/04/2014 |
| Projected Total Depth | 2980 | 3980 |
| Save Link | //kcc/detail/operatorE ditDetail.cfm?docID=12 17952 | //kcc/detail/operatorE ditDetail.cfm?docID=12 21720 |