

Well will not be drilled or Permit Expired Date: _

Signature of Operator or Agent:

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

Kansas Corporation Commission Oil & Gas Conservation Division

1222106

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:
monur day year	Sec Twp S. R E\
PERATOR: License#	feet from N / S Line of Section
lame:	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?
lame:	Target Formation(s):
Well Drilled For: Well Class: Type Equipment:	Nearest Lease or unit boundary line (in footage):
Oil Enh Rec Infield Mud Rotary	Ground Surface Elevation:feet MS
Gas Storage Pool Ext. Air Rotary	Water well within one-quarter mile:
Disposal Wildcat Cable	Public water supply well within one mile:
Seismic ;# of Holes Other	Depth to bottom of fresh water:
Other:	Depth to bottom of usable water:
If OWING, old well information on fallows.	Surface Pipe by Alternate: III
If OWWO: old well information as follows:	Length of Surface Pipe Planned to be set:
Operator:	Length of Conductor Pipe (if any):
Well Name:	Projected Total Depth:
Original Completion Date: Original Total Depth:	Formation at Total Depth:
Directional, Deviated or Horizontal wellbore?	Water Source for Drilling Operations:
Directional, Deviated or Horizontal wellbore? Yes No f Yes, true vertical depth:	Well Farm Pond Other:
Bottom Hole Location:	DWR Permit #:
CCC DKT #:	(Note: Apply for Permit with DWR)
	Will Cores be taken? Yes N If Yes, proposed zone:
AF	FIDAVIT
The undersigned hereby affirms that the drilling, completion and eventual plu	gging of this well will comply with K.S.A. 55 et. seq.
t is agreed that the following minimum requirements will be met:	
Notify the appropriate district office <i>prior</i> to spudding of well; A copy of the approved notice of intent to drill <i>shall be</i> posted on each	n drilling rig;
 Notify the appropriate district office <i>prior</i> to spudding of well; A copy of the approved notice of intent to drill <i>shall be</i> posted on each The minimum amount of surface pipe as specified below <i>shall be set</i> 	by circulating cement to the top; in all cases surface pipe shall be set
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1. Notify the appropriate district office <i>prior</i> to spudding of well; 2. A copy of the approved notice of intent to drill <i>shall be</i> posted on each 3. The minimum amount of surface pipe as specified below <i>shall be set</i> through all unconsolidated materials plus a minimum of 20 feet into th 4. If the well is dry hole, an agreement between the operator and the dis 5. The appropriate district office will be notified before well is either pluge 6. If an ALTERNATE II COMPLETION, production pipe shall be cemente Or pursuant to Appendix "B" - Eastern Kansas surface casing order #" must be completed within 30 days of the spud date or the well shall be approved by: Description	by circulating cement to the top; in all cases surface pipe shall be set e underlying formation. Inicit office on plug length and placement is necessary prior to plugging; ged or production casing is cemented in; d 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 a plugged. In all cases, NOTIFY district office prior to any cementing. Remember to: - File Certification of 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 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;

SEWARD CO. 3390' FEL

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.

erator:		Location of vieil: County:
ase:		feet from N / S Line of Section
Il Number:		feet from E / W Line of Section
ld:		SecTwpS. R E W
mber of Acres attributable to well:		
R/QTR/QTR/QTR of acreage:		Is Section: Regular or Irregular
		If Section is Irregular, locate well from nearest corner boundary.
		Section corner used: NE NW SE SW
		Section contenused. NE NW SE SW
	DI	.AT
Show location of the w		ease or unit boundary line. Show the predicted locations of
	_	uired by the Kansas Surface Owner Notice Act (House Bill 2032).
isase isase, taini sattorios, pip		
	715 ft.	eparate plat if desired.
: :	: : :	:
		LEGEND
:	·	
: : :	: "" " "	2310 ft. O Well Location
		Tank Battery Location
	· · · ·	Pipeline Location
		Electric Line Location
		Lease Road Location
	······································	
		EXAMPLE :
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	26	
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		:

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.

CORRECTION #1 Kansas Corporation Commission Oil & Gas Conservation Division

1222106

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:	Pit is:		·	
Emergency Pit Burn Pit	Proposed Existing		SecTwp R	
Settling Pit Drilling Pit	If Existing, date constructed:		Feet from North / South Line of Section	
Workover Pit Haul-Off Pit			Feet from East / West Line of Section	
(If WP Supply API No. or Year Drilled)	Pit capacity:	(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? Yes No	Artificial Liner? Yes	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	
	om ground level to dee	,		
If the pit is lined give a brief description of the liner Describe procedures for periodic maintenance and determining				
material, thickness and installation procedure.		iner integrity, ir	ncluding any special monitoring.	
Distance to nearest water well within one-mile of pit: Depth to shallo			west fresh water feet.	
Source of inf		Source of inforr	mation: well owner electric log KDWR	
feet Depth of water well Emergency, Settling and Burn Pits ONLY:	1661		over and Haul-Off Pits ONLY:	
Producing Formation:			Il utilized in drilling/workover:	
Number of producing wells on lease:			working pits to be utilized:	
		Abandonment p	procedure:	
Does the slope from the tank battery allow all spilled fluids to		Drill nite must h	se closed within 365 days of sould date	
flow into the pit? Yes No Drill pits must be closed within 365 days of spud date.			e dosed within 505 days of spud date.	
_				
Submitted Electronically				
	KCC	OFFICE USE O		
Data Provinced	h	5	Liner Steel Pit RFAC RFAS	
Date Received: Permit Num	nei:	Permi	t Date: Lease Inspection: Yes No	

CORRECTION #1

Kansas Corporation Commission

1222106

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

OIL & GAS CONSERVATION DIVISION

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 East West	
Address 1:	County:	
Address 2:	Lease Name: Well #:	
City: State: Zip:+	If filing a Form T-1 for multiple wells on a lease, enter the legal description of	
Contact Person:	the lease below:	
Phone: () Fax: ()		
Email Address:		
Surface Owner Information:		
Name:	When filing a Form T-1 involving multiple surface owners, attach an additional	
Address 1:	sheet listing all of the information to the left for each surface owner. Surface owner information can be found in the records of the register of deeds for the	
Address 2:	county, and in the real estate property tax records of the county treasurer.	
City:		
the KCC with a plat showing the predicted locations of lease roads, tar	odic Protection Borehole Intent), you must supply the surface owners and 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	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 o	acknowledge that, because I have not provided this information, the wner(s). To mitigate the additional cost of the KCC performing this is 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		
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Summary of Changes

Lease Name and Number: FULL BORE 3

API/Permit #: 15-195-22962-00-00

Doc ID: 1222106

Correction Number: 1

Approved By: Rick Hestermann 09/09/2014

Field Name	Previous Value	New Value
KCC Only - Approved By	Rick Hestermann 09/08/2014	Rick Hestermann 09/09/2014
KCC Only - Approved Date	09/08/2014	09/09/2014
KCC Only - Date Received	09/06/2014	09/08/2014
KCC Only - Lease Inspection	Yes	No
Lease Name	EL SHADDAI	FULL BORE
Save Link	//kcc/detail/operatorE ditDetail.cfm?docID=12 21914	//kcc/detail/operatorE ditDetail.cfm?docID=12 22106