

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

1224867

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					
DPERATOR: License#	(Q/Q/Q/Q) feet from N / S Line of Section					
Name:	feet from E / W Line of Section					
Address 1:	Is SECTION: Regular Irregular?					
ddress 2:	(Note: Locate well on the Section Plat on reverse side)					
City: State: Zip: +	County:					
Contact Person:	Lease Name: Well #:					
hone:	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 OWWO: old well information as follows:	Surface Pipe by Alternate: III					
II OVVVO. Oid 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:					
virectional, Deviated or Horizontal wellbore?	Water Source for Drilling Operations:					
Yes, true vertical depth:	Well Farm Pond Other: DWR Permit #:					
Sottom Hole Location:	(Note: Apply for Permit with DWR)					
(CC DKT #:	Will Cores be taken?					
	If Yes, proposed zone:					
AEC	IDAVIT					
he undersigned hereby affirms that the drilling, completion and eventual plu						
	gging of this well will comply with K.S.A. 35 et. seq.					
t is agreed that the following minimum requirements will be met:	gging of this well will comply with N.S.A. 33 et. Seq.					
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Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202



feet from

feet from

Ν /

E /

S Line of Section

W Line of Section

For KCC Use ONLY	
API # 15	

Well Number:

Operator: __

Lease: __

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.

Location of Well: County: __

Field:							_ Se	ec	Twp	S. R	E	W
Number of QTR/QTR/							- Is	Section:	Regular or	Irregular		
									Irregular, locate er used: NE			boundary.
	SI	how location	on of the w	vell. Show	footage to	the neare	PLAT	r unit boun	dary line. Show t	the predicted lo	cations of	
					d electrica	l lines, as	required l		sas Surface Own			932).
		: : : :	:			:	:	: : : :		LEGE	ND	
		:		:	•••••	:	 : : :	: : :			ocation attery Loca e Location	tion
		:	:		••••	:				Electric	: Line Location Road Locat	
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		:		:		:	· · · · · · · · · · · · · · · · · · ·	:				
2220 ft		:	:	0		:	:			0		1980' FSL
										: !!:	:	

1250 ft.

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

1224867

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 Is the bottom below ground level? Yes No	Artificial Liner?	Existing Instructed: (bbls) 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) 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			
material, thickness and installation procedure.		liner integrity, ir	cluding any special monitoring.			
Distance to nearest water well within one-mile of	of pit:	Depth to shallo	west fresh water feet. mation:			
feet Depth of water well	feet	measured	well owner electric log KDWR			
Emergency, Settling and Burn Pits ONLY:		Drilling, Worko	over and Haul-Off Pits ONLY:			
Producing Formation:		Type of material utilized in drilling/workover:				
Number of producing wells on lease:		Number of working pits to be utilized:				
Barrels of fluid produced daily:		Abandonment p	procedure:			
Does the slope from the tank battery allow all s flow into the pit? Yes No	oilled fluids to	Drill pits must be closed within 365 days of spud date.				
Submitted Electronically						
	КСС	OFFICE USE O	NLY Steel Pit RFAC RFAS			
Date Received: Permit Numl	ber:	Permi	t Date: Lease Inspection: Yes No			



Kansas Corporation Commission Oil & Gas Conservation Division

1224867

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:						
Address 2:						
City: State: Zip:+						
Contact Person:	the lease helow:					
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: State: Zip:+	_					
are preliminary non-binding estimates. The locations may be entered Select one of the following: 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	ank batteries, pipelines, and electrical lines. The locations shown on the plated on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. Be Act (House Bill 2032), I have provided the following to the surface the located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form mobeing 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.					
KCC will be required to send this information to the surface	I acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this less of the surface owner by filling out the top section of this form and the 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 C	ing fee with this form. If the fee is not received with this form, the KSONA-1 P-1 will be returned.					
Submitted Electronically						
I						

OIL WELL LOCATION

Bow Creek Oil Company, LLC SE QTR. OF THE SW QTR. SECTION 9, T14S, R22W TREGO COUNTY, KANSAS MARLA KAY #1

