

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

1226325

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#	(0/0/0/0) feet from N / S Line of Section						
Name:	feet from E / W Line of Section						
ddress 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: I II						
	Length of Surface Pipe Planned to be set:						
Operator:	Length of Conductor Pipe (if any):						
Well Name: Original Total Depth:	Formation at Total Depth:						
Original Completion Bate Original Total Beptil	Water Source for Drilling Operations:						
irectional, Deviated or Horizontal wellbore?	Well Farm Pond Other:						
Yes, true vertical depth:	DWR Permit #:						
Bottom Hole Location:	(Note: Apply for Permit with DWR)						
(CC DKT #:	Will Cores be taken?						
	If Yes, proposed zone:						
AFF							
	IDAVIT						
he undersigned hereby affirms that the drilling, completion and eventual plu	IDAVIT						
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he undersigned hereby affirms that the drilling, completion and eventual plu	IDAVIT gging of this well will comply with K.S.A. 55 et. seq.						
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Side Two



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:							Lo	cation	of Well	: County:						
Lease:								ou	0			from	N /	S Li	ne of Sect	tion
Well Number:											feet	from	E / [W Li	ne of Sect	tion
Field:							Se	c		Twp	S.	R	[E	W	
Number of Ac	res attri	outable to	well:				- lo !	Contin	n:	Regular	ar 🗀	rro audor				
QTR/QTR/QT	R/QTR	of acreag	e:					Sectio	n.	_ Regular	01	rregular				
							If S	Sectio	n is Irre	egular, loc	ate well	from ne	arest co	rner bo	ındary.	
							Se	ction (corner u	ısed:	NE	NW	SE	SW		
le.				rell. Show i	d electrica		required b	y the i	Kansas	Surface O						
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NOTE: In all cases locate the spot of the proposed drilling locaton.

4950 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.



KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

226325

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 Workover Pit Haul-Off Pit (If WP Supply API No. or Year Drilled)	Pit is: Proposed If Existing, date continued in the continue of the continue	Existing nstructed:(bbls)	SecTwpR East WestFeet from North / South Line of SectionFeet from East / West Line of SectionCounty						
Is the pit located in a Sensitive Ground Water A	rea? 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						
Distance to nearest water well within one-mile of	of nit	Denth to shallo	west fresh waterfeet.						
Distance to nearest water well within one-fille t	л рп.	Source of infor	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:		Drilling, Workover and Haul-Off Pits ONLY: Type of material utilized in drilling/workover: Number of working pits to be utilized: Abandonment procedure:							
Does the slope from the tank battery allow all s flow into the pit? Yes No	pilled fluids to	·	e 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	nit Date: Lease Inspection: Yes No						



Kansas Corporation Commission Oil & Gas Conservation Division

1226325

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:	Lease Name: Well #:
City: State: Zip:+	_ If filing a Form T-1 for multiple wells on a lease, enter the legal description or
Contact Person:	the lease helow:
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:	accepts and in the real estate preparts toy records of the accepts traceurer
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. Act (House Bill 2032), I have provided the following to the surface elecated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form me 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.
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 handliform 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	
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Kansas Oil and Gas

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Kansas Geological Survey



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WELL PLUGGING RECORD

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X	API	NUMBER_	15-035-23,9	28

STATE CORPORATION COMMISSION	K.A.R82-3-117	API NUMBER 15-035-23,928						
200 Colorado Derby Building Hichita, Kansas 67202	, in the second	LEASE NAME Templar						
	TYPE OR PRINT	WELL NUMBER 1						
	NOTICE: Fill out completely and return to Cons. Div.	4950 Ft. from S Section Line						
	office within 30 days.	330' Ft. from E Section Line						
_EASE OPERATORMako Ex	ploration	SEC. 17 TWP. 30 RGE. 5 (E) or (XMX)						
ADDRESS 16036 E. Harry, N		COUNTY Cowley						
PHONE#(316)_265-7346OPERA		Date Well Completed 6-28-90						
Character of Well D&A		Plugging Commenced $6-28-90$						
(Oil, Gas, D&A, SWD, Input, Wa		Plugging Completed 6-28-90						
The plugging proposal was appr		(date)						
by	Don Thompson	(KCC District Agent's Name).						
Is ACO-1 filed? No It								
		Bottom T.D. 2970						
		ons. PECEDED						
OIL, GAS OR WATER RECORDS		CASING RECORD						
		18 to 18 11 1 1 1900						
Formation Content	From To Size 8 5/8	219 none CONSCIENCE						
		Wichita, Kansas						
Describe in detail the manner	in which the well was plugge	ed, indicating where the mud fluid wa into the hole. If cement or other plug						
placed and the method or metwere used, state the charac	hods used in introducing it is oter of same and depth plac Spotted 35sx cement @ 1	ced, from feet to teet each set						
	Spotted 35sx cement @ 1	.150' thru drill pipe .70' " " " "						
	1: 25 11 6	(01						
(If additional des	10 SX $1n$	rathole. ACK of this form. SATE CORPORATION COMMISSION License No 5420						
Name of Plugging Contractor Wh	nite & Ellis Drilling, Inc.	.1/#-1-7-0						
Address 401 E. Douglas, Suite		OUL 1 1990						
NAME OF PARTY RESPONSIBLE FOR		GONSERVATION DIVISION Wichita: Kansas						
STATE OF Kansas	COUNTY OF <u>Sedgwick</u>	, ss.						
Michael I Considine	. ((Employee of Operator) or ���������������������������������						
Michael L. Considine above-described well, being f	irst duly sworn on oath, says	s: That I have knowledge of the facts						
statements, and matters her the same are true and correct	ein contained and the log of	the above-described well as filed tha						
	(Signature	e) Muchael B. Considere						
e e	(Address)	401 E. Douglas, Süite 500, Wichita						
SUBSCRIBED A	AND SWORN TO before me this	16 to of July , 19 96721						
	A Landers	hand haden						
My Commissio		Notary Public Notary Public						
,	My Appt Exp. Sep	pt 5, 1992 Form CP-4						

Form CP-4 Revised 05-88