

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:	
Effective	Date:	
District #		
SGA?	Yes No	

SGA?

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

, est andulari ar demphariae mar are randua	Surface Owner Notification Act, MUST be submitted with this form.					
Expected Spud Date:	Spot Description:					
month day year	Sec Twp S. R E					
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: State: Zip: +	County:					
Contact Person:	Lease Name: Well #:					
Phone:	Field Name:					
CONTRACTOR: License#	Is this a Prorated / Spaced Field?					
Name:	Target Formation(s):					
Well Drilled For: Well Class: Type Equipment:	Nearest Lease or unit boundary line (in footage):					
	Ground Surface Elevation:feet MSL					
Oil Enh Rec Infield Mud Rotary	Water well within one-quarter mile:					
Gas Storage Pool Ext. Air Rotary 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:					
Outor.	Surface Pipe by Alternate:					
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:					
Original Completion Date.	Water Source for Drilling Operations:					
Directional, Deviated or Horizontal wellbore? Yes No	Well Farm Pond Other:					
If Yes, true vertical depth:	DWR Permit #:					
Bottom Hole Location:	(Note: Apply for Permit with DWR)					
KCC DKT #:	Will Cores be taken?					
	If Yes, proposed zone:					
A E-1	FID AVIIT					
	FIDAVIT					
The undersigned hereby affirms that the drilling, completion and eventual plu	agging of this well will comply with K.S.A. 55 et. seq.					
It is agreed that the following minimum requirements will be met:						
 Notify the appropriate district office prior to spudding of well; 						
2. A copy of the approved notice of intent to drill shall be posted on each	9 <i>0</i> ,					
The minimum amount of surface pipe as specified below shall be set 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 plugg	, , , , , , , , , , , , , , , , , , , ,					
6. If an ALTERNATE II COMPLETION, production pipe shall be cemente	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					
must be completed within 30 days of the spud date or the well shall be	e plugged. In all cases, NOTIFY district office prior to any cementing.					
ubmitted Electronically						
For KCC Hos ONLY	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;					
Conductor pipe requiredfeet	- File Drill Pit Application (form CDP-1) with Intent to Drill;					
Minimum surface pipe requiredfeet per ALT.	- File Completion Form ACO-1 within 120 days of spud date;					
	- File acreage attribution plat according to field proration orders;					
Approved by:	 Notify appropriate district office 48 hours prior to workover or re-entry; Submit plugging report (CP-4) after plugging is completed (within 60 days); 					
This authorization expires: (This authorization void if drilling not started within 12 months of approval date.)	Obtain written approval before disposing or injecting salt water.					
	If well will not be drilled or permit becomined (See: authorized expiration data)					

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

Spud date: _

Side Two



For KCC Use ONLY	
API # 15	

Operator: __

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: ___

Lease:										feet from	N /	S Line	of Section
Well Numl	ber:									feet from	E /	W Line	of Section
Field:							_ Se	ec	Twp	S. R		E	W
	of Acres attr						_	Section:	Regular or				4
								ection corne	Irregular, locater used: N	E NW			uary.
					_				dary line. Show				
		ads, tank b 57 ft.	atteries, p	ipelines and				by the Kans e plat if des	as Surface Owr ired.	ner Notice Act	: (House B	ill 2032).	
		:	:	:			:	:		LEG	END		
		:	· · · · · · · · · · · · · · · · · · ·	:		:			[Tank	Location Battery L ine Locat		
852 ft.		: :		: : :		:	: : :	:	-	Elect Leas	ric Line L e Road Lo		
		:	:	:		:	:	<u>:</u>	EXA	MPLE :	: : : :	: : :	
				3	6		: :				:	:	
										[:]	: : :	:	1980' FSL
		:	•		•••••	:	: : :						
						: : : :			SEWARI	CO. 3390' FE	E.	:	

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.

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).
- 5. The predicted locations of lease roads, tank batteries, pipelines, and electrical lines.



KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

227852

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 If Existing, date col Pit capacity: urea? Yes	Existing nstructed: (bbls)	SecTwp R East WestFeet from North / South Line of Section Feet from East / West Line of Section County Chloride concentration: mg/l 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. mation:			
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			



Kansas Corporation Commission Oil & Gas Conservation Division

1227852

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

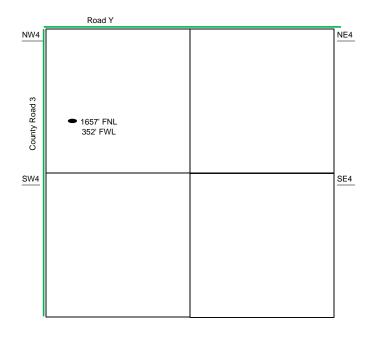
This form must be submitted with all Forms C-1 (Notice of Intent to Drill); CB-1 (Cathodic Protection Borehole Intent); T-1 (Request for Change of Operator Transfer of Injection or Surface Pit Permit); and CP-1 (Well Plugging Application).

Any such form submitted without an accompanying Form KSONA-1 will be returned.

OPERATOR: License #	Well Location:					
Name:						
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 additiona					
Address 1:	owner information can be found in the records of the register of deeds for the					
Address 2:						
City: State: Zip:+	-					
	ank batteries, pipelines, and electrical lines. The locations shown on the plat I on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.					
owner(s) of the land upon which the subject well is or will be	e Act (House Bill 2032), I have provided the following to the surface e 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	I acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this ss of the surface owner by filling out the top section of this form and e KCC, which is enclosed with this form.					
KCC will be required to send this information to the surface task, I acknowledge that I must provide the name and address that I am being charged a \$30.00 handling fee, payable to the	owner(s). To mitigate the additional cost of the KCC performing this so of the surface owner by filling out the top section of this form and e KCC, which is enclosed with this form. If the fee is not received with this form, the KSONA-1					
KCC will be required to send this information to the surface task, I acknowledge that I must provide the name and address that I am being charged a \$30.00 handling fee, payable to the If choosing the second option, submit payment of the \$30.00 handling fee.	owner(s). To mitigate the additional cost of the KCC performing this so of the surface owner by filling out the top section of this form and e KCC, which is enclosed with this form. If the fee is not received with this form, the KSONA-1					

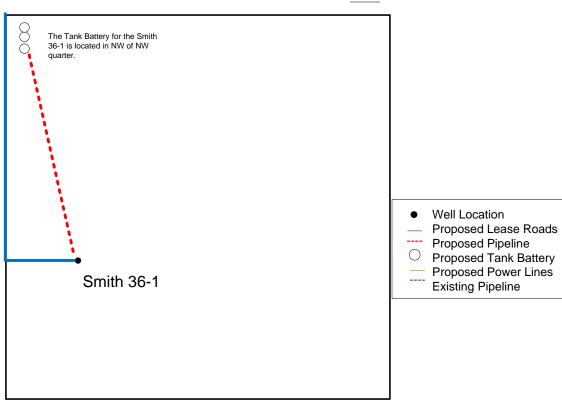
Proposed Plan of Construction

Smith 36-1 Sec 36 T31S-R39W Stevens County, KS



Sec 36 - T31S - R39W





Proposed Details of NW/4 Sec 36 – T31S – R39W

> Proposed Site Diagram Smith 36-1 October 13, 2014

