

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	

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	do	l/OOT	Spot Description:
	month	day	year	,SecTwpS. R 🔲 E 🔲 W
OPERATOR: License#				feet from N / S Line of Section
Name:				feet from E / W Line of Section
Address 1:				1 0F0T10N1
Address 2:				
City:				(Note: Locate well of the Goddon't lat of reverse slac)
Contact Person:				County.
Phone:				Lease Name: Well #:
CONTRACTOR II				Field Name:
CONTRACTOR: License#				is the difference of epaced field.
Name:				Target Formation(s):
Well Drilled For:	Well Class	s: Type	Equipment:	Nearest Lease or unit boundary line (in footage):
Oil Enh F	Rec Infield	d 🗌	Mud Rotary	Ground Surface Elevation:feet MSL
Gas Stora			Air Rotary	Water well within one-quarter mile:
Dispo			Cable	Public water supply well within one mile:
Seismic : # 0				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:				
Well Name:				Projected Total Depth:
Original Completion Da				
Original Completion De	116	. Original lotal	Берин.	Water Source for Drilling Operations:
Directional, Deviated or Ho	rizontal wellbore?	•	Yes No	Well Farm Pond Other:
If Yes, true vertical depth: _				
Bottom Hole Location:				DWK Femili #
KCC DKT #:				(Note: Apply for Fernill Will DWT
				If Yes, proposed zone:
				ii ies, proposed zone.
			AF	FIDAVIT
The undersigned hereby	affirms that the c	drilling, comple	etion and eventual p	lugging of this well will comply with K.S.A. 55 et. seq.
It is agreed that the follow	ving minimum red	quirements wi	II be met:	
Notify the appropri	ate district office	nrior to soud	ding of well:	
Notify the appropriate ap				sh drilling rig:
17 11				t by circulating cement to the top; in all cases surface pipe shall be set
				he underlying formation.
4. If the well is dry ho	le, an agreemen	t between the	operator and the di	strict office on plug length and placement is necessary prior to plugging;
The appropriate dis	strict office will be	e notified befo	re well is either plug	gged or production casing is cemented in;
				ed 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	l within 30 days o	of the spud da	te or the well shall b	be plugged. In all cases, NOTIFY district office prior to any cementing.
ubmitted Electron	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;
				- File Drill Pit Application (form CDP-1) with Intent to Drill;
Conductor pipe required		fe	eet	- File Completion Form ACO-1 within 120 days of spud date;
Minimum surface pipe red	quired	feet	per ALT. I	- 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 expire (This authorization void if a		ithin 12 months	-f -l - t -	- Obtain written approval before disposing or injecting salt water.
			or approval date i	obtain without approval bollors allopsolling of injecting start fraction

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

Spud date: _



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:							LOC	ation of vveil:	i: County:
Lease:							. <u> </u>		feet from N / S Line of Section
Well Num	nber:								feet from E / W Line of Section
Well Number:							Sec		Twp S. R
1 1010.								·	9
Number of	of Acres attr	ributable to	well:				ls S	Section:	Regular or Irregular
QTR/QTF	R/QTR/QTR	of acreag	e:				15 (COLIOII.	
							It C	action is les	regular, locate well from nearest corner boundary.
									used: NE NW SE SW
							Sec	tion corner u	used: NE NVV SE SVV
						ı	PLAT		
	SI	how location	n of the we	ell. Show f	ootage to	the neares	t lease or	unit boundar	ry line. Show the predicted locations of
					-				s Surface Owner Notice Act (House Bill 2032).
								plat if desired	
	196	5 ft.			700 7770	y anaon a	oopa.a.o	p.a acoc	
	_	•							
		:							
		:							LEGEND
					•••••				O W. III
		:			:				O Well Location
		:							Tank Battery Location
					••••••				Pipeline Location
		:			:	:			Electric Line Location
		:				:			Lease Road Location
184 ft.	<u> </u>		:		:	:			
10411.		:	: :		:	:	:		
		:							
		:							EXAMPLE
		:	:		_ :	:	:		
		:		1	5	:			
		:	:		:	:	:		
	•••••					:			
		:				:			
		:	:		:	:			: : :
	•••••								1980' FSL
		:							
		:				i			
					•••••				
		:	:		:	:	:		
		:			:	:			SEWARD CO. 3390' FEL
		•	:			:			SEMAND OO OOO I EE

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

228651

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 SectionFeet from East / West Line of Section County Chloride concentration: mg/l mg/l mg/l mg/l reference from 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:		
Submitted Electronically Drill pits must be closed within 365 days of spud date.					
KCC OFFICE USE ONLY Liner Steel Pit RFAC RFAS					
Date Received: Permit Num	ber:	Permi	t Date: Lease Inspection: Yes No		



Kansas Corporation Commission Oil & Gas Conservation Division

1228651

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:	_ 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:	country and in the real estate preparty toy records of the country transport				
City:	_				
	thodic Protection Borehole Intent), you must supply the surface owners and				
	ank batteries, pipelines, and electrical lines. The locations shown on the plat d on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.				
Select one of the following:					
owner(s) of the land upon which the subject well is or will b	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 m being filed is a Form C-1 or Form CB-1, the plat(s) required by this x, 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 ess 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 handli 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 CP-1 will be returned.				
Submitted Electronically					
I					

