

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**

	month day	vear	Spot Description:
	monun day	year	
PERATOR: License#			feet from N / S Line of Section
			feet from E / W Line of Secti
ddress 1:			Is SECTION: Regular Irregular?
			(Note: Locate well on the Section Plat on reverse side)
	State: Zip:		County:
Contact Person:			Lease Name: Well #:
hone:			Field Name:
ONTRACTOR: License#	:		Is this a Prorated / Spaced Field?
ame:			Target Formation(s):
			Nearest Lease or unit boundary line (in footage):
Well Drilled For:	Well Class: Type	e Equipment:	Ground Surface Elevation:feet MS
Oil Enh F	Rec Infield	Mud Rotary	Water well within one-quarter mile:
Gas Stora	ge Pool Ext.	Air Rotary	
Dispo		Cable	
Seismic ;# c			Depth to bottom of fresh water:
Other:			Depth to bottom of usable water:
If OW/WO: old well	information as follows:		Surface Pipe by Alternate:   I   II
			Length of Surface Pipe Planned to be set:
-			
			Projected Total Depth:
Original Completion Da	ate: Original Total	I Depth:	
inactional Deviated on Lla	2 مع ما المدين المام محانين	□ Voo □ No	Water Source for Drilling Operations:
Directional, Deviated or Ho	onzontal wellbore?	Yes No	Well Farm Pond Other:
			DWR Permit #:
			(Note: Apply for Permit with DWR )
			vviii cores se takeri:
			If Yes, proposed zone:
		AF	FIDAVIT
he undersigned hereby	affirms that the drilling, comple		FIDAVIT ugging of this well will comply with K.S.A. 55 et. seq.
-	affirms that the drilling, compliving minimum requirements wi	etion and eventual pl	
t is agreed that the follow	ving minimum requirements wi	etion and eventual pliill be met:	
is agreed that the follow  1. Notify the appropris		etion and eventual pliill be met:	ugging of this well will comply with K.S.A. 55 et. seq.
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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 Num	ber:									_ feet from	E /	W Line	of Section
Field:							_ Se	C	Twp	S. R		_ E _	W
	of Acres attr						_	Section:	Regular or	Irregula			
								ction corne	Irregular, locate er used: NE			smer boun SW	aary.
					_				dary line. Show t ass Surface Own				
	18	05 ft.			You m	ay attach a	a separate	plat if des	ired.				
		:	:	:		:	:	: : : :		LEG	SEND		
		:		:						Tank	Location Battery L line Locat		
345 ft.		:		:		:	: : : :	:	-		tric Line L se Road L		
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							:		SEWARD	:    <b>CO</b> . 3390'FI	<b>E</b> L	:	

#### 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

1228661

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	Pit is:	Existing	SecTwp R				
Settling Pit Drilling Pit	If Existing, date con	structed:	Feet from North / South Line of Section				
Workover Pit Haul-Off Pit (If WP Supply API No. or Year Drilled)	Pit capacity:	(bbls)	Feet from East / West Line of Section County				
Is the pit located in a Sensitive Ground Water A	rea? Yes 1	No	Chloride concentration: mg/l (For Emergency Pits and Settling Pits only)				
Is the bottom below ground level?  Yes No	Artificial Liner?	0	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	m ground level to dee	pest point:	(feet) No Pit				
If the pit is lined give a brief description of the line material, thickness and installation procedure.			dures for periodic maintenance and determining ncluding 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, Workover 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 splow into the pit? Yes No	pilled fluids to	Drill pits must be closed within 365 days of spud date.					
Submitted Electronically							
KCC OFFICE USE ONLY  Liner Steel Pit RFAC RFAS							
Date Received: Permit Numb	ber:	Permi	t Date: Lease Inspection: Yes No				



#### KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1228661

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:	SecTwpS. R East West				
Address 1:	County:				
Address 2:	Lease Name: Well #:				
City:	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:	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:					
City:					
the KCC with a plat showing the predicted locations of lease roads, tar are preliminary non-binding estimates. The locations may be entered a 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 form; and 3) my operator name, address, phone number, fax,  I have not provided this information to the surface owner(s). I KCC will be required to send this information to the surface of task, I acknowledge that I must provide the name and address that I am being charged a \$30.00 handling fee, payable to the	acknowledge that, because I have not provided this information, the owner(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 the fee is not received with this form, the KSONA-1				
form and the associated Form C-1, Form CB-1, Form T-1, or Form CF  Submitted Electronically	- I wiii be returnea.				
T.					

