

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:	Spot Description:
month day year	
ODERATOR, Licensett	(0/0/0/0) feet from N / S Line of Section
OPERATOR: License# Name:	feet from E / W Line of Section
Address 1:	Is SECTION: Regular Irregular?
Address 2:	
City: State: Zip: +	(Note: Locate well on the Section Plat on reverse side)
Contact Person:	County:
Phone:	Lease Name: Well #:
CONTRACTOR, Licensett	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):
Oil Enh Rec Infield Mud Rotary	Ground Surface Elevation:feet MSL
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:
	Surface Pipe by Alternate: III
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:
	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:	( <b>Note:</b> Apply for Permit with DWR )
KCC DKT #:	Will Cores be taken? Yes No
	If Yes, proposed zone:
ΔΕΕ	IDAVIT
	IDAVIT raing of this well will comply with K.S.A. 55 et. seg.
The undersigned hereby affirms that the drilling, completion and eventual plu	
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Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

Spud date: \_

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:		

Side Two



SEWARD CO. 3390' FEL

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:	Location of Well: County:
ease:	feet from N / S Line of Section
Vell Number:	feet from E / W Line of Section
Field:	Sec Twp S. R
Number of Acres attributable to well:	Is Section: Regular or Irregular
	If Section is Irregular, locate well from nearest corner boundary.  Section corner used: NE NW SE SW
Pl	LAT
	ease or unit boundary line. Show the predicted locations of
	quired by the Kansas Surface Owner Notice Act (House Bill 2032).
You may attach a se 330 ft.	eparate plat if desired.
	2310 ft.
	LEGEND
	Tank Battery Location
	Pipeline Location
	: Electric Line Location
	Lease Road Location
	·
	<u>:</u>
	EXAMPLE : :
· · · · · · · · · · · · · · · · · · ·	
33	
	1980' FSL

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

1229787

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	Pit is:  Proposed  If Existing, date con  Pit capacity:  Trea?  Yes	Existing nstructed: (bbls)	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)			
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:		Type of materia	over and Haul-Off Pits ONLY:  all utilized in drilling/workover:  king pits to be utilized:  procedure:			
Does the slope from the tank battery allow all s flow into the pit? Yes No	pilled fluids to	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

1229787

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:	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 o the lease below:					
Contact Person:						
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 or	s batteries, pipelines, and electrical lines. The locations shown on the plat In 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 be lo	ct (House Bill 2032), I have provided the following to the surface ocated: 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 ow	cknowledge that, because I have not provided this information, the vner(s). To mitigate the additional cost of the KCC performing this of the surface owner by filling out the top section of this form and 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 CP-	fee with this form. If the fee is not received with this form, the KSONA-1 1 will be returned.					
Submitted Electronically						
·						

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: Tonkyn Ripl. LLC	Location of Well: County: Gruhim
Lease: Project	feet from N / S Line of Section
Well Number:	feet from E / W Line of Section
Field: Bollo	Sec. 3 Twp. 9 S. R. 25 E W
Number of Acres attributable to well:	Is Section: Regular or Inregular
QTR/QTR/QTR/QTR of acreage: NW -NW - NE	13 decitors. Linegular of Linegular
	If Section is irregular, locate well from nearest corner boundary.
	Section corner used: NE NW SE SW

#### **PLAT**

Show location of the well. Show footage to the nearest lease or unit boundary line. Show the predicted locations of lease roads, tank batteries, pipelines and electrical lines, as required by the Kansas Surface Owner Notice Act (House Bill 2032). You may attach a separate plat if desired.

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١			•	•		:	•	•			Elect	ric Line L	ocation	
				:		•		:		-	- Leas	e Road L	ocation	
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											Ο 		•	1980' FSL
١.				; 				: 		•••••••		••••••	•••••••	
			·											
									SE	WARD CO.	3390 FE	L		•

NOTE: In all cases locate the spot of the proposed drilling locaton.

#### In plotting the proposed location of the well, you must show:

- 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.

Notice: Fill out COMPLETELY and return to Conservation Division at the address below within 60 days from plugging date.

OPERATOR: License #: 4058

## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form CP-4 March 2009 Type or Print on this Form Form must be Signed All blanks must be Filled

#### WELL PLUGGING RECORD K.A.R. 82-3-117

API No. 15 - 065-20332 - 00 00

Name: American Warrior Inc.					Spot Description: NW-NW-NE			
Address 1: P.O. Box 399					C_NW_NW_NE_Sec.33_Twp.9_S. R. 25 East Wes			
Address 2:					4,950 Feet from North / V South Line of Section			
city: Garden City				2,310 Feet from East / West Line of Section				
•		•			Calculated from Near			
Contact Person:Jody_Smith					NE NW [		Comer.	
		OG D&A Cathodic	$\overline{}$	l		<u> </u>		
_ =	=	SWD Permit #:		•	Graham			
ENHR Permit#:					ne: Brungardt		#: <u>A-1</u>	
		log attached? Yes	. 1	Date Well 0	Completed:7/23/	2/15/1:	1	
Producing Formation(s): List A	<del>_</del>		""	The plugging proposal was approved on: 2/15/11 (Date) by: Marvin Mills (KCC District Agent's Name)				
Lansing Depth to		m: <u>4028</u> т.р. <u>4028'</u>					District Agent's Name)	
		m: T.D			ommenced: 4/25/		<del></del>	
		m:T.D		Plugging C	ompleted: 4/25/	/11		
Борити	5 top 50tto	<u></u>						
Show depth and thickness of	all water, oil and gas forma	ations.	•					
Oil, Gas or Water			Cacina E	Pacard /Suda	ce, Conductor & Produ	untinal		
Formation	Content	Casing	Size	tecora (Sana	Setting Depth	Pulled Out		
Tomaton	Content	Casing	3126		Setting Deptin	Fulled Out		
Lansing	Oil	Surface	85/8		209'	0		
	-	Production	51/2		4019'	0		
			_=-4:3					
<u> </u>						<del> </del>		
gel with 200# hulls 1350, Pumped 135 casing. Pumped 5	, Pulled tbg to 22 sx 60/40 pos 4% 50sx 60/40 poss 4	95' to 186',2spf. R 00', Pumped 85sx ( gel Cement circul 1% gel Cement circ d shut in. Cut pipe	60/40 ated u ulated	pos 4% up annul d up 85/8	gel with 200# us. Pulled th 3 Closed 85/8	thulls, Pulled bg. Hooked in.Pump 30 ack filled	d tbg to up to 51/2	
Plugging Contractor License #	<sub>f:</sub> 32382		Name:	Swift Se	ervices Inc.		APR 2 7 2011	
Address 1: P.O. Box 46						KC	C WICHITA	
City: Ness City				State: KS	•	Zip: <u>6/560</u>	+ <u>0466</u>	
Phone: (785_) _ 798-23	300							
Name of Party Responsible fo	r Plugging Fees: <u>Amer</u>	rican Warrior Inc.				<del></del>	<del></del>	
State of Kansas	County, _	Finney		, \$S.				
Jody Smith				_ 🚺 Emp	loyee of Operator or	Operator on a	bove-described well,	
being first duly sworn on oath,	(Print Name)	as of the facts statements as	d metter	e harain aant	ained and the less of	the show density	nd woll is as filed and	
the same are true and correct		go or the lacts statements, an	a matter	a nerem cont	anco, and the log of	the above-describe	O WELL IS US MED, MIND	
11/1 / C		~ ~						
Signature:	Mail to: KCC - Con	servation Division, 130 S. I	<u>د۔</u> Market -	- Room 207	8, Wichita, Kansas	67202		

Conservation Division 266 N. Main St., Ste. 220 Wichita, KS 67202-1513



Phone: 316-337-6200 Fax: 316-337-6211 http://kcc.ks.gov/

Sam Brownback, Governor

Shari Feist Albrecht, Chair Jay Scott Emler, Commissioner Pat Apple, Commissioner

October 29, 2014

Bill Robinson TexKan Exploration LLC 307 NW 3RD ST PO BOX H PLAINVILLE, KS 67663

Re: Drilling Pit Application Pfeifer 3 NE/4 Sec.33-09S-25W Graham County, Kansas

#### Dear Bill Robinson:

District staff has inspected the location and has determined that an unsealed condition will present a pollution threat to water resources.

District staff has recommended that the reserve pit be lined. If a plastic liner is to be used it must have a minimum thickness of 16 mil. Integrity of the liner must be maintained at all times.

If production casing is set all completion fluids shall be removed from the working pits daily. NO completion fluids or non-exempt wastes shall be placed in the reserve pit.

The fluids are to be removed from the reserve pit as soon as the Hutchinson Salt section has been drilled through and displacement of the fluids into the reserve pit has occurred. The fluids should be removed again as soon as practical after drilling operations have ceased.

The fluids should be taken to an authorized disposal well. Please call the District Office at (785) 625-0550 when the fluids have been removed. Please file form CDP-5 (August 2008), Exploration and Production Waste Transfer, through KOLAR within 30 days of fluid removal.

A copy of this letter should be posted in the doghouse along with the approved Intent to **Drill.** If you have any questions or concerns please feel free to contact the District Office at (785) 625-0550.