

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: | Spot Description: |
|--|---|
| month day yea | Sec. Twp. S. R E W |
| OPERATOR: License# | (0/0/0/0) feet from N / S Line of Section |
| Name: | fact from E / W Line of Continu |
| Address 1: | Is SECTION: Regular Irregular? |
| Address 2: | |
| City: State: Zip: + _ | |
| Contact Person: | Lease Name: Well #: |
| Phone: | Field Name: |
| CONTRACTOR: License# | |
| Name: | Target Formation(s): |
| | Negreet League or unit houndary line (in footage): |
| Well Drilled For: Well Class: Type Equipme | nt. |
| Oil Enh Rec Infield Mud Rota | Ground Surface Elevation:feet MSL |
| Gas Storage Pool Ext. Air Rotar | Water well within one-quarter mile: |
| Disposal Wildcat Cable | Public water supply well within one mile: Yes No |
| 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: III |
| II OVVVO. Old well information as follows. | Length of Surface Pipe Planned to be set: |
| Operator: | |
| Well Name: | |
| Original Completion Date: Original Total Depth: | Formation at Total Depth: |
| | Water Source for Drilling Operations: |
| | es No Well Farm Pond Other: |
| If Yes, true vertical depth: | DWK Feithilt #. |
| Bottom Hole Location: | (Note: Apply for Fernile Will DWK) |
| KCC DKT #: | Will Cores be taken? |
| | If Yes, proposed zone: |
| | AFFIDAVIT |
| | |
| The undersigned hereby affirms that the drilling, completion and | eventual plugging of this well will comply with K.S.A. 55 et. seg. |
| | eventual plugging of this well will comply with K.S.A. 55 et. seq. |
| It is agreed that the following minimum requirements will be met: | |
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| It is agreed that the following minimum requirements will be met: 1. Notify the appropriate district office <i>prior</i> to spudding of w 2. A copy of the approved notice of intent to drill <i>shall be</i> pos 3. The minimum amount of surface pipe as specified below s through all unconsolidated materials plus a minimum of 20 4. If the well is dry hole, an agreement between the operator 5. The appropriate district office will be notified before well is 6. If an ALTERNATE II COMPLETION, production pipe shall Or pursuant to Appendix "B" - Eastern Kansas surface cas must be completed within 30 days of the spud date or the Submitted Electronically For KCC Use ONLY API # 15 | Remember to: - File Certification of Compliance with the Kansas Surface Owner Notification Act (KSONA-1) with Intent to Drill; - File Completion Form ACO-1 within 120 days of spud date; - File acreage attribution plat according to scompleted (within 60 days); |



| 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 fr | om N / S Line of Section |
|---------------------------------------|--|---|---------------------------|
| Well Number: | | feet fr | om E / W Line of Section |
| Field: | | Sec Twp S. F | R |
| Number of Acres attributable to well: | <u> </u> | Is Section: Regular or Irr | egular |
| QTR/QTR/QTR of acreage: | | is dection. | cguiai |
| | | If Section is Irregular, locate well for Section corner used: NE N | |
| | the well. Show footage to the nearest le | .AT ease or unit boundary line. Show the pred | |
| lease roads, tank batteri | | uired by the Kansas Surface Owner Notice eparate plat if desired. 495 ft. | ee Act (House Bill 2032). |
| : : | : : : | : | |
| | | ○+ 165 ft. | LEGEND |
| | | | Well Location |
| | | | Tank Battery Location |
| : : | : : : : | | Pipeline Location |
| : : : | : : : : | | Electric Line Location |
| | | | Lease Road Location |
| : : | : | · · · · · · · · · · · · · · · · · · · | Lease Road Location |
| : : : | : | : | |
| | | | |
| : : : | <u>i</u> <u>i</u> | EXAMPLE | |
| | 6 | | |
| | | | ····· |
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| : : | : : : | | |
| | | | |
| \ \ \ \ | | | 1980' FSL |
| | | | |
| | | SEWARD CO. 33 | 90' FFI |

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

1231354

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 Is the bottom below ground level? Yes No | Pit is: Proposed Existing If Existing, date constructed: Pit capacity: (bbls) Area? Yes No Artificial Liner? Yes No | | SecTwp R East West Feet from North / South Line of Section Feet from East / West Line of Section County Chloride concentration: mg/l | | |
| Pit dimensions (all but working pits): | Length (fee | et) | Width (feet) N/A: Steel Pits | | |
| Depth fro | m ground level to dee | epest point: | (feet) No Pit | | |
| If the pit is lined give a brief description of the liner material, thickness and installation procedure. Describe procedures for periodic maintenance and determining liner integrity, including any special monitoring. | | | | | |
| Distance to nearest water well within one-mile of pit: Depth to shallo Source of inform | | | west fresh water feet. mation: | | |
| feet Depth of water wellfeet measured | | well owner electric log KDWR | | | |
| Emergency, Settling and Burn Pits ONLY: | | Drilling, Worko | over and Haul-Off Pits ONLY: | | |
| Producing Formation: Type of materi | | al utilized in drilling/workover: | | | |
| Number of producing wells on lease: Number of world | | king pits to be utilized: | | | |
| Barrels of fluid produced daily: Abandonment | | procedure: | | | |
| Does the slope from the tank battery allow all spilled fluids to flow into the pit? Yes No Drill pits must be | | pe closed within 365 days of spud date. | | | |
| Submitted Electronically | | | | | |
| KCC OFFICE USE ONLY Liner Steel Pit RFAC RFAS | | | | | |
| Date Received: Permit Numb | oer: | Permi | t Date: Lease Inspection: Yes No | | |



Kansas Corporation Commission Oil & Gas Conservation Division

1231354

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 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: | |
| 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. |
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| | 5824 | R-A15 | R-815 | R-(15 | R-D15 | R-E15 R-F15 | R-615 | RI_617 R |
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| 5 | 5 | K-A7 K-A9 | R-B 7 R-B 8 B 8 K5-B 7 R | RI-CA | XX | R-E) | K-67 | 8-H7 R-H8 |
| _ | 3/4 | R-A R-A | X KT-B4 | RT-CG | (R-D; | REET REET | Kate R-6 | XX BY STAN |
| | 165 495 825 1155 1485 1915 2145 2745 2805 3135 3465 3795 4125 4455 4785 | R-A6 | 0 | 37 | 9 | R-F6 | 99. | RICES. R. H.G. |
| | 485 | R-AS R | R-05 R X X KT-05 | 5, 28 | R-05 R-05 R-05 | R-ES KA-ES KA-ES | Res R | XX KILL |
| | 155 1 | R-A4 X | XX | -C4 | #4 × 22 | E KYX | X S | × |
| | 5 | 13 KI-43 | XX | 3 R-C4 | 24 | ×14 | ׎ | 61-63 R-H3 |
| | 8 | R-A3 RI-A3 | K-153 | K-(3 | NA R-D3 | RATES RATES RATES | ×47 | Xi-6 |
| | 495 | RT-AI | A-8-1-10-1-10-1-10-1-10-1-10-1-10-1-10-1 | R-C1 R-C3 | × ia | R-F3 | R-6. | - P |
| | 165 | | 200 | | | à Fà | R-61 | 100 |
| | | 10 | 3 | 8 = | 2 3 | 1915 | - | 3475 |

- Lease line/ Flowlines - Producing well X - Injection well