

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

1238431

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	Sec Twp S. R				
DPERATOR: License#	(Q/Q/Q/Q) feet from N / S Line of Section				
lame:	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:	County:				
Contact Person:	Lease Name: Well #:				
Phone:	Field Name:				
CONTRACTOR: License#	Is this a Prorated / Spaced Field?				
lame:	Target Formation(s):				
Well Drilled For: Well Class: Type Equipment:	Nearest Lease or unit boundary line (in footage):				
	Ground Surface Elevation:feet MS				
Oil Enh Rec Infield Mud Rotary	Water well within one-quarter mile:				
Gas Storage Pool Ext. Air Rotary	Public water supply well within one mile:				
Disposal Wildcat Cable	Depth to bottom of fresh water:				
Seismic ; # of Holes Other Other:	Depth to bottom of usable water:				
Other.	Surface Pipe by Alternate: I 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:				
onginal completion batel onginal lotal boptin	Water Source for Drilling Operations:				
Directional, Deviated or Horizontal wellbore? Yes No	Well Farm Pond Other:				
f Yes, true vertical depth:	DWR Permit #:				
Bottom Hole Location:	(Note: Apply for Permit with DWR)				
(CC DKT #:	Will Cores be taken?				
	If Yes, proposed zone:				
AEE					
	IDAVIT				
The undersigned hereby affirms that the drilling, completion and eventual plug	IDAVIT				
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Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

_ Agent: _



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	cation of W	Vell: County:	
Lease:									feet from N / S Line of Section	
Well Numb	er:								feet from E / W Line of Section	
Field:							Se	SecTwpS. R		
	Acres attrib						15 (Section:	Regular or Irregular	
QIR/QIR/	QTR/QTR	of acreag	e:							
								Section is ction corne	Irregular, locate well from nearest corner boundary. er used: NE NW SE SW	
							36	CHOIT COITIE	ar useuiviivivstsvv	
							PLAT			
					_				dary line. Show the predicted locations of	
	lease road	ds, tank ba	atteries, pi	pelines an				y the Kans plat if desi	sas Surface Owner Notice Act (House Bill 2032).	
			53	1 ft.	TOU TH	ay attacir c	зорагаю	piat ii ucsi	nou.	
			:	:		:	:	:		
1718 ft				:		:		:	LEGEND	
17 10 II			<u> </u>		•••••				O Well Location	
			:	: :		:	:	:	Tank Battery Location	
	:		:	:		:	:	:	Pipeline Location	
			:	:		:	:	:	Electric Line Location	
			: :	:		:	:	:	Lease Road Location	
	:	•••••	:	:	••••	:	:	:		
			•	:		:		:	EXAMPLE : :	
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	:						:	:	: : :	
	:	•••••	:	:	•••••	:	:	:	1980' FSL	
						• • •	:	• • •		
			•		••••			•		
						• • •	:	: : :		
	:					:	:	· •	SEWARD CO. 3390' FEL	

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

238431

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 Existing If Existing, date constructed: Pit capacity: (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?	Artificial Liner? Yes N	No	How is the pit lined if a plastic liner is not used?	
	Length (fee		Width (feet)	
If the pit is lined give a brief description of the li material, thickness and installation procedure.	illel		dures for periodic maintenance and determining 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:		Drilling, Work	over and Haul-Off Pits ONLY:	
Producing Formation:	_	Type of materia	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 s flow into the pit? Yes No	pilled fluids to	Drill pits must b	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	it Date: Lease Inspection: Yes No	



Kansas Corporation Commission Oil & Gas Conservation Division

1238431

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.

	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				
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 county, and in the real estate property tax records of the county treasurer.				
Address 2:					
City:					
are preliminary non-binding estimates. The locations may be entered or	batteries, pipelines, and electrical lines. The locations shown on the plat 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 rner(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 CCC, 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-					



