

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

| , est andulari ar demphariae mar are randua | Surface Owner Notification Act, MUST be submitted with this form. | | |
|---|--|--|--|
| Expected Spud Date: | Spot Description: | | |
| month day year | Sec Twp S. R E | | |
| OPERATOR: License# | feet from N / S Line of Section | | |
| Name: | 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: State: Zip: + | County: | | |
| Contact Person: | Lease Name: Well #: | | |
| Phone: | 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): | | |
| | Ground Surface Elevation:feet MSL | | |
| Oil Enh Rec Infield Mud Rotary | Water well within one-quarter mile: | | |
| Gas Storage Pool Ext. Air Rotary 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: | | |
| Outor. | Surface Pipe by Alternate: | | |
| 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: | | |
| Original Completion Date Original Total Doptin | 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: | (Note: Apply for Permit with DWR) | | |
| KCC DKT #: | Will Cores be taken? | | |
| | If Yes, proposed zone: | | |
| A - | FID AVIIT | | |
| | FIDAVIT | | |
| The undersigned hereby affirms that the drilling, completion and eventual plu | agging of this well will comply with K.S.A. 55 et. seq. | | |
| It is agreed that the following minimum requirements will be met: | | | |
| Notify the appropriate district office prior to spudding of well; | | | |
| 2. A copy of the approved notice of intent to drill shall be posted on each | 9 <i>0</i> , | | |
| The minimum amount of surface pipe as specified below shall be set through all unconsolidated materials plus a minimum of 20 feet into th | | | |
| 4. If the well is dry hole, an agreement between the operator and the dis | | | |
| 5. The appropriate district office will be notified before well is either plugg | , | | |
| 6. If an ALTERNATE II COMPLETION, production pipe shall be cemente | d 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 within 30 days of the spud date or the well shall be | e plugged. In all cases, NOTIFY district office prior to any cementing. | | |
| | | | |
| | | | |
| ubmitted Electronically | | | |
| For KCC Hos ONLY | 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; | | |
| Conductor pipe requiredfeet | - File Drill Pit Application (form CDP-1) with Intent to Drill; | | |
| Minimum surface pipe requiredfeet per ALT. | - File Completion Form ACO-1 within 120 days of spud date; | | |
| | File acreage attribution plat according to field proration orders; Notify appropriate district office 48 hours prior to workover or re-entry; | | |
| Approved by: | - Notify appropriate district office 46 flours prior to workover of re-entry, - Submit plugging report (CP-4) after plugging is completed (within 60 days); | | |
| This authorization expires: (This authorization void if drilling not started within 12 months of approval date.) | Obtain written approval before disposing or injecting salt water. | | |
| | approximation and a second a second and a second an | | |

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

Spud date: _

Side Two



feet from N / S Line of Section

_____ Twp. _____ S. R. _____

feet from E / W Line of Section

E

| For KCC Use ONLY |
|------------------|
| API # 15 |

Field:

Well Number:

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: ___

| of Acres attributable to well: R/QTR/QTR of acreage: | | Is Section: Regular or Irregular |
|---|--------------------|--|
| | | If Section is Irregular, locate well from nearest corner boundary Section corner used: NE NW SE SW |
| | | PLAT |
| | _ | lease or unit boundary line. Show the predicted locations of equired by the Kansas Surface Owner Notice Act (House Bill 2032). |
| | You may attach a s | separate plat if desired. |
| : : | | |
| | | LEGEND |
| | | O Well Location |
| | ii | Tank Battery Location Pipeline Location |
| | | Electric Line Location Lease Road Location |
| | · | 1020 ft. |
| | | EXAMPLE : |
| | 31 | |
| | | |
| | | |
| | | 1980 |
| | | |

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

3250 ft.

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.
- $2. \ \, \text{The distance of the proposed drilling location from the south / north and east / west outside section lines}.$
- 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

1245370

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 County mg/l (For Emergency Pits and Settling Pits only) 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 | om ground level to dee | epest point: | (feet) No Pit | | |
| material, thickness and installation procedure. | | liner integrity, ir | cluding any special monitoring. | | |
| Distance to nearest water well within one-mile 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, Worko | over and Haul-Off Pits ONLY: | | |
| Producing Formation: | | Type of materia | ıl utilized in drilling/workover: | | |
| Number of producing wells on lease: | | Number of worl | king pits to be utilized: | | |
| Barrels of fluid produced daily: | | Abandonment p | procedure: | | |
| Does the slope from the tank battery allow all s flow into the pit? Yes No | oilled fluids to | , | e closed within 365 days of spud date. | | |
| Submitted Electronically | | | | | |
| KCC OFFICE USE ONLY Liner Steel Pit RFAC RFAS | | | | | |
| Date Received: Permit Numl | ber: | Permi | t Date: Lease Inspection: Yes No | | |



Kansas Corporation Commission Oil & Gas Conservation Division

1245370

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: | 3 | | |
| 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 as of the surface owner by filling out the top section of this form and KCC, which is enclosed with this form. | | |
| form and the associated Form C-1, Form CB-1, Form T-1, or Form CF | g fee with this form. If the fee is not received with this form, the KSONA-1 P-1 will be returned. | | |
| Submitted Electronically | | | |
| | | | |

Data use subject to license.
© DeLorme. Topo North America™ 9.
www.delorme.com

