

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	(Q/Q/Q/Q) 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?	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?
	If Yes, proposed zone:
AFF	IDAVIT
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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.



\_\_feet from \_\_\_ N / \_\_\_ S Line of Section

For KCC Use ONLY	
API # 15	

Operator: \_\_\_

Lease: \_\_\_

### 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: \_\_\_

Well Numbe	er:									_ feet from E / W Line of Section
Field:							_ Se	C	Twp	S. R L E L W
Number of Acres attributable to well:						ls Section: Regular or Irregular				
									_	e well from nearest corner boundary.  NW SE SW
ı					d electrica	the neare Il lines, as	required b	y the Kans	as Surface Own	the predicted locations of er Notice Act (House Bill 2032).
Γ		:	<u> </u>	:	You m	ay attach a	a separate	plat if desi	red.	
							:			LEGEND
					•••••	:			<u></u>	<ul><li>Well Location</li><li>Tank Battery Location</li><li>Pipeline Location</li></ul>
						:	:			Lease Road Location
				:		:			EXAM	MPLE : :
_		·	<u>.                                      </u>	2	 1 	- : : : :	· : : :	: : : :		
				·		· :		·		
	•••••		••••••	:	******	:  :	:	:		1980' FSL
940 ft.		— <b>Ф</b>		: :	•••••	: :	: :	: :	•••••	
				•		:	:	:	SEWARD	3300' FEI

#### 540 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. 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

1252950

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:	Pit is:						
Emergency Pit Burn Pit	Proposed	Existing	SecTwp R				
Settling Pit Drilling Pit	If Existing, date co	nstructed:	Feet from North / South Line of Section				
Workover Pit   Haul-Off Pit   (If WP Supply API No. or Year Drilled)	Pit capacity:		Feet from East / West Line of Section County				
		(bbls)					
Is the pit located in a Sensitive Ground Water A	rea? Yes	No	Chloride concentration: mg/l  (For Emergency Pits and Settling Pits only)				
Is the bottom below ground level?	Artificial Liner?		How is the pit lined if a plastic liner is not used?				
Yes No	Yes N	No					
Pit dimensions (all but working pits):	Length (fe	et)	Width (feet) N/A: Steel Pits				
	om ground level to dee						
If the pit is lined give a brief description of the li material, thickness and installation procedure.	ner		dures for periodic maintenance and determining cluding any special monitoring.				
Distance to nearest water well within one-mile of	of pit:	Depth to shallo Source of infor	west fresh water feet.				
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	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							
Submitted Liectionically							
KCC OFFICE USE ONLY  Liner Steel Pit RFAC RFAS							
Date Received: Permit Num	her:	Darmi	t Date: Lease Inspection: Yes No				



### Kansas Corporation Commission Oil & Gas Conservation Division

1252950

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.			
T.				

Township:		Range:	County:		State:	
		_				
	540 FSL 940 FWL			,		

Tank Battery Road
Pipeline Liectric Line