

For KCC Use:	
Effective Date:	
District #	
SGA? Yes No	

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form CB-1 March 2010 Form must be Typed Form must be Signed

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CATHODIC PROTECTION BOREHOLE INTENT All blanks must be Filled

Must be approved by the KCC sixty (60) days prior to commencing well.

Expected Spud Date:	Spot Description:
month day year	ļ · · · ·
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:	(Check directions from nearest outside corner boundries)
City:	County:
Contact Person:	Facility Name:
Phone:	Borehole Number:
CONTRACTOR: License#	Ground Surface Elevation: MSI
Name:	Cathodic Borehole Total Depth: feet
Type Drilling Equipment:	Depth to Bedrock: fee
☐ Air Rotary ☐ Other	Water Information
Construction Features	Aquifer Penetration: None Single Multiple
Length of Cathodic Surface (Non-Metallic) Casing	Depth to bottom of fresh water:
Planned to be set: feet	Depth to bottom of usable water:
Length of Conductor pipe (if any): feet	Water well within one-quarter mile: Yes No
Surface casing borehole size: inches	Public water supply well within one mile: Yes No
Cathodic surface casing size: inches	Water Source for Drilling Operations:
Cathodic surface casing centralizers set at depths of:;;	Well Farm Pond Stream Other
;;;;;;	Water Well Location:
Cathodic surface casing will terminate at:	
Above surface Surface Vault Below Surface Vault	Standard Dimension Ratio (SDR) is =
Pitless casing adaptor will be used: Yes No Depth feet	(Cathodic surface csg. O.D. in inches / MWT in inches = SDR) Annular space between borehole and casing will be grouted with:
Anode installation depths are:;;;;;	Concrete Neat Cement Bentonite Cement Bentonite Clay
	Anode vent pipe will be set at:
;;;;;;;	Anode conductor (backfill) material TYPE:
	Depth of BASE of Backfill installation material:
A FFID AVIT	Depth of TOP of Backfill installation material:
AFFIDAVIT	Borehole will be Pre-Plugged? Yes No
The undersigned hereby affirms that the drilling, completion and eventual plugging	
of this well will comply with K.S.A. 55-101 et. seq.	
t is agreed that the following minimum requirements will be met:	
1. Notify the appropriate District office prior to spudding and again before plugging the	vell. An agreement between the operator and the District Office on plugs
and placement is necessary prior to plugging. In all cases, notify District Office prior	to any grouting.
P. Notify appropriate District Office 48 hours prior to workover or re-entry.	
A complete appropriate action of intent to delli the literature and the control of the	
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For KCC Use ONLY	
API # 15	

IN ALL CASES, PLEASE FULLY COMPLETE THIS SIDE OF THE FORM.

In all cases, please fully complete this side of the form. Include items 1 through 3 at the bottom of this page.

Operato	or:						_ Loc	cation of Well	l: County:			
	Name:								fe		/ S Line	of Section
	e Number: _								fe	et from E	/ W Line	of Section
							Se	C. ———	Twp] w
							ls S	Section:	Regular or	Irregular		
								Section is Irrection corner u	egular, locate we	ell from nearest	SW	dary.
							PLAT					
									boundary line. Sh			
	lease roa	ads, tank b	atteries, pi	ipelines an					s Surface Owner I	Notice Act (Hous	se Bill 2032).	
	4004	£ı.			You ma	ay attach a	a separate	plat if desire	ed.			
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		:	:	:		:	:	:	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 section's south / north and east / west; line.

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

3. The predicted locations of lease roads, tank batteries, pipelines, and electrical lines.



KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1253669

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: Burn Pit Burn Pit	Pit is:	Existing	SecTwp R			
Settling Pit Workover Pit Haul-Off Pit (If WP Supply API No. or Year Drilled)	If Existing, date con Pit capacity:	(bbls)	Feet from North / South Line of SectionFeet from East / West Line of SectionCounty			
Is the pit located in a Sensitive Ground Water A	rea? Yes N	No	Chloride concentration: mg/l (For Emergency Pits and Settling Pits only)			
Is the bottom below ground level? Yes No	Artificial Liner?	0	How is the pit lined if a plastic liner is not used?			
Pit dimensions (all but working pits):	Length (fee	t)	Width (feet) N/A: Steel Pits			
Depth fro	m ground level to deep	pest point:	(feet) No Pit			
If the pit is lined give a brief description of the line material, thickness and installation procedure.	ner		dures for periodic maintenance and determining ncluding any special monitoring.			
Distance to nearest water well within one-mile of	of pit:	Depth to shallowest fresh water feet. Source of information:				
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 sp flow into the pit? Yes No	pilled fluids to	Drill pits must be closed within 365 days of spud date.				
Submitted Electronically						
	кссс	OFFICE USE OI	NLY Liner Steel Pit RFAC RFAS			
Date Received: Permit Numb	ber:	Permi	t Date: Lease Inspection: Yes No			



Kansas Corporation Commission Oil & Gas Conservation Division

1253669

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	1 (Cathodic Protection Borehole Intent) T-1 (Transfer) CP-1 (Plugging Application)					
OPERATOR: License #	Well Location:					
Name:						
Address 1:	County:					
Address 2:	Lease Name: Well #:					
City:	3					
Contact Person:	the lease below:					
Phone: () Fax: ()						
Email Address:						
Surface Owner Information:						
Name:						
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:						
City: State: Zip:+						
the KCC with a plat showing the predicted locations of lease roads, ta are preliminary non-binding estimates. The locations may be entered 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	nodic Protection Borehole Intent), you must supply the surface owners and ank batteries, pipelines, and electrical lines. The locations shown on the plat on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. Act (House Bill 2032), I have provided the following to the surface elocated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form in being filed is a Form C-1 or Form CB-1, the plat(s) required by this					
KCC will be required to send this information to the surface of	acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this ss of the surface owner by filling out the top section of this form and					
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 Cl	ng fee with this form. If the fee is not received with this form, the KSONA-1 P-1 will be returned.					
Submitted Electronically						
r						

Form	CB1CDP1 - Cathodic Protection Borehole Intent					
Operator	Southern Star Central Gas Pipeline, Inc.					
Well Name	C57243 01					
Doc ID	1253669					

Anode Installation Depths

Depth	
90	
280	
270	
260	
250	
240	
230	
220	
210	
200	
90	
80	
70	
60	
50	

For KCC Use ONLY	
API # 15	-

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Operator:							_ Loc	Location of Well: County:				
Facility Nan	ne:							feet from N / S Line of Section				
Borehole Number:								feet from E / W Line of Section				
								SecTwpS. R				
							ls S	Section:	Regular or Irregular			
							If S	ection is	Irregular, locate well from nearest corner boundary.			
								tion corne				
							PLAT					
						_			nit boundary line. Show the predicted locations of			
	lease roa	ads, tank b	atteries, pi	pelines an					sas Surface Owner Notice Act (House Bill 2032).			
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45 FT	• Ö				•••••			•	Pipeline Location Electric Line Location			
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1016FT.

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