

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

1254004

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 |
| OPERATOR: License# | feet from N / S Line of Sectio |
| 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: | , |
| Contact Person: | County: |
| Phone: | |
| CONTRACTOR: License# | Field Name: |
| 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 MSI |
| Gas Storage Pool Ext. Air Rotary | Water well within one-quarter mile: |
| Disposal Wildcat Cable | Public water supply well within one mile: Yes N |
| 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 |
| III OVVVO. Old Well IIIIOITTIAtion 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? Yes No | Well Farm Pond Other: |
| If Yes, true vertical depth: | DWR Permit #: |
| Bottom Hole Location: KCC DKT #: | (Note: Apply for Permit with DWR) |
| | Will Cores be taken? |
| | If Yes, proposed zone: |
| AFF | IDAVIT |
| The undersigned hereby affirms that the drilling, completion and eventual plu | gging of this well will comply with K.S.A. 55 et. seq. |
| It is agreed that the following minimum requirements will be met: | |
| | |
| 1 Notity the appropriate district office prior to shidding of well- | |
| Notify the appropriate district office <i>prior</i> to spudding of well; A copy of the approved notice of intent to drill <i>shall be</i> posted on each | drilling rig: |
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Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

Spud date: _

Side Two



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

IN ALL CASES PLOT THE INTENDED WELL ON THE PLAT BELOW

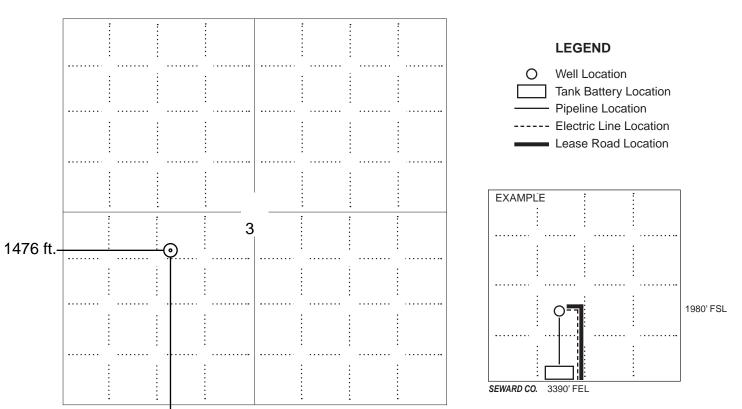
In all cases, please fully complete this side of the form. Include items 1 through 5 at the bottom of this page.

| Operator: | Location of Well: County: |
|---------------------------------------|--|
| Lease: | feet from N / S Line of Section |
| Well Number: | feet from E / W Line of Section |
| Field: | Sec Twp S. R |
| Number of Acres attributable to well: | Is Section: Regular or Irregular |
| | If Section is Irregular, locate well from nearest corner boundary. Section corner used: NE NW SE SW |

PLAT

Show location of the well. Show footage to the nearest lease or unit boundary line. Show the predicted locations of lease roads, tank batteries, pipelines and electrical lines, as required by the Kansas Surface Owner Notice Act (House Bill 2032).

You may attach a separate plat if desired.



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

2112 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.
- 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

254004

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): | |
| If the pit is lined give a brief description of the lin | Artificial Liner? Yes N Length (fee | (bbls) No lo spest point: | SecTwpR East WestFeet from North / South Line of SectionFeet from East / West Line of SectionCounty Chloride concentration: mg/l | |
| material, thickness and installation procedure. | | liner integrity, ir | cluding any special monitoring. | |
| Distance to nearest water well within one-mile of | of pit: | Depth to shallo | west fresh water feet. nation: | |
| feet Depth of water well | feet | measured | well owner electric log KDWR | |
| Emergency, Settling and Burn Pits ONLY: Producing Formation: Number of producing wells on lease: Barrels of fluid produced daily: Does the slope from the tank battery allow all so flow into the pit? Yes No Submitted Electronically | | Type of material Number of work Abandonment p Drill pits must b | e closed within 365 days of spud date. | |
| | | | | |
| 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

1254004

Form KSONA-1
January 2014
Form Must Be Typed
Form must be Signed
All blanks must be Filled

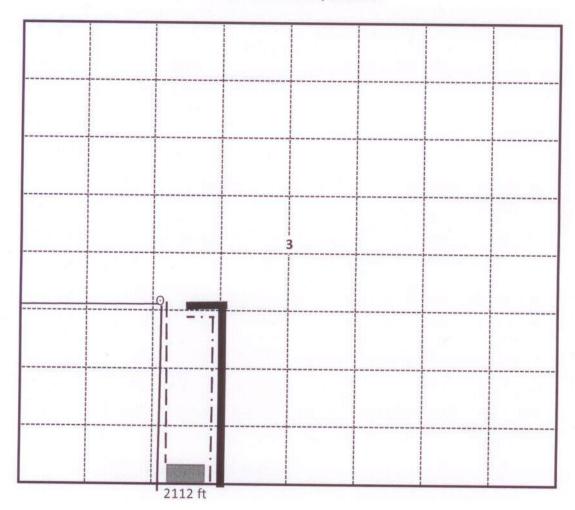
CERTIFICATION OF COMPLIANCE WITH THE KANSAS SURFACE OWNER NOTIFICATION ACT

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: | | | |
| Address 1: | | | |
| Address 2: | Lease Name: Well #: | | |
| City: State: Zip:+ | If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below: | | |
| Contact Person: | | | |
| 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 weel estate property toy records of the county traceurer | | |
| City: State: Zip:+ | _ | | |
| | thodic Protection Borehole Intent), you must supply the surface owners and | | |
| | ank batteries, pipelines, and electrical lines. The locations shown on the plat d on 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 b | e Act (House Bill 2032), I have provided the following to the surface e located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form m being filed is a Form C-1 or Form CB-1, the plat(s) required by this x, and email address. | | |
| KCC will be required to send this information to the surface | I acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this ess of the surface owner by filling out the top section of this form and the KCC, which is enclosed with this form. | | |
| If choosing the second option, submit payment of the \$30.00 handli form and the associated Form C-1, Form CB-1, Form T-1, or Form C | ing fee with this form. If the fee is not received with this form, the KSONA-1 CP-1 will be returned. | | |
| Submitted Electronically | | | |
| I | | | |

PLATT ATTACHED TO KSONA-1 FORM QUIN-TON I, LLC 3-1 SEC 3 TWP 14S R39 W WALLACE COUNTY, KANSAS



LEGEND

