

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**

Expected Spud Date:	month	day	vear	Spot Description:	
	monur	uay	year	(0.0.0.0)	E 🔲 🛚
PERATOR: License#				feet from N / S Line of	f Section
ame:				feet from E / W Line o	f Section
ddress 1:				Is SECTION: Regular Irregular?	
ddress 2:					
City:				County:	
Contact Person:				Lease Name: Well #:	
hone:				Field Name:	
CONTRACTOR: License#				Is this a Prorated / Spaced Field?	N
lame:				Target Formation(s):	
Well Drilled For:	Well Class	. Type	Equipment:	Nearest Lease or unit boundary line (in footage):	
				Ground Surface Elevation:	eet MS
Oil Enh F		=	Mud Rotary Air Rotary	Water well within one-quarter mile:	
Dispo	• =		Cable	Public water supply well within one mile:	- <u> </u>
Seismic ;# o				Depth to bottom of fresh water:	
Other:				Depth to bottom of usable water:	
				Surface Pipe by Alternate: II II	
If OWWO: old well	information as foll	ows:		Length of Surface Pipe Planned to be set:	
Operator:				Length of Conductor Pipe (if any):	
Well Name:				Projected Total Depth:	
Original Completion Da	ate:	Original Total D	Depth:	Formation at Total Depth:	
				Water Source for Drilling Operations:	
Directional, Deviated or Ho			Yes No	Well Farm Pond Other:	
f Yes, true vertical depth: _				DWR Permit #:	
Bottom Hole Location:				( <b>Note:</b> Apply for Permit with DWR )	
(CC DKT #:				VIII COTCS DC LAKETT:	N
				It yes brodosed zone.	
				If Yes, proposed zone:	
			AF	FIDAVIT	
	affirms that the d	rilling, complet			
The undersigned hereby			tion and eventual p	FIDAVIT	
The undersigned hereby t is agreed that the follow	ving minimum req	uirements will	tion and eventual p	FIDAVIT	
The undersigned hereby	ving minimum req	uirements will <b>prior</b> to spudd	tion and eventual p be met: ling of well;	FIDAVIT lugging of this well will comply with K.S.A. 55 et. seq.	
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Side Two



For KCC Use ONLY	
API # 15	

#### IN ALL CASES PLOT THE INTENDED WELL ON THE PLAT BELOW

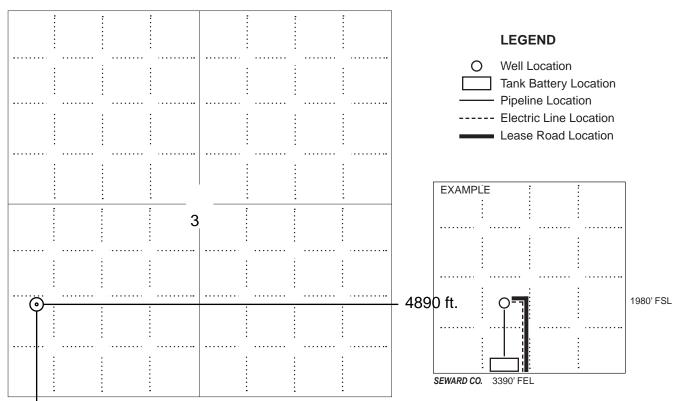
In all cases, please fully complete this side of the form. Include items 1 through 5 at the bottom of this page.

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.

#### 1265 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

65049 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:	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	Pit capacity:		Feet from East / West Line of Section	
(If WP Supply API No. or Year Drilled)		(bbls)	County	
Is the pit located in a Sensitive Ground Water A	rea? Yes	No	Chloride concentration: mg/l	
To the processing in a content of country training			(For Emergency Pits and Settling Pits only)	
Is the bottom below ground level?  Yes No	Artificial Liner?  Yes  N	No	How is the pit lined if a plastic liner is not used?	
			NAC data (force)	
Pit dimensions (all but working pits):		,	Width (feet) N/A: Steel Pits No Pit	
If the pit is lined give a brief description of the li	om ground level to dee ner		dures for periodic maintenance and determining	
material, thickness and installation procedure.			cluding any special monitoring.	
Distance to nearest water well within one-mile	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 p	procedure:	
Does the slope from the tank battery allow all s flow into the pit? Yes No	pilled fluids to	Drill nite must h	e 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	t Date: Lease Inspection: Yes No	



#### Kansas Corporation Commission Oil & Gas Conservation Division

1265049

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.

OPERATOR: License #	Well Location:		
Name:			
Address 1:	County:		
Address 2:	Lease Name: Well #:		
City: State: Zip:+	the lease helow		
Contact Person:			
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:	and the second in the construction of the cons		
City: State: Zip:+	-		
	ank batteries, pipelines, and electrical lines. The locations shown on the plat I on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.		
owner(s) of the land upon which the subject well is or will be	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 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	I 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 e KCC, which is enclosed with this form.		
KCC will be required to send this information to the surface task, I acknowledge that I must provide the name and address that I am being charged a \$30.00 handling fee, payable to the	owner(s). To mitigate the additional cost of the KCC performing this so of the surface owner by filling out the top section of this form and e KCC, which is enclosed with this form.  If the fee is not received with this form, the KSONA-1		
KCC will be required to send this information to the surface task, I acknowledge that I must provide the name and address that I am being charged a \$30.00 handling fee, payable to the If choosing the second option, submit payment of the \$30.00 handling fee.	owner(s). To mitigate the additional cost of the KCC performing this so of the surface owner by filling out the top section of this form and e KCC, which is enclosed with this form.  If the fee is not received with this form, the KSONA-1		

Shofner Sec 3 TWP17 Range 22E 9-0-4 9-0-5 D-3 1-DI-3 1-DI-4 1-DI-6 A-01-2 A-01-5 A-01-7 -8 -21 -0-9 D-01-8 A-4 DI-9 -17 -D-11 · -4 1.2 \* PIPE LINES + ROADS Conservation Division 266 N. Main St., Ste. 220 Wichita, KS 67202-1513



Phone: 316-337-6200 Fax: 316-337-6211 http://kcc.ks.gov/

Sam Brownback, Governor

Shari Feist Albrecht, Chair Jay Scott Emler, Commissioner Pat Apple, Commissioner

### NOTICE TO OPERATORS FILING INTENT TO DRILL FOR DISPOSAL OR ENHANCED RECOVERY INJECTION WELLS, (CLASS II INJECTION WELL)

The attached approved Notice of Intent to Drill indicates the proposed well is to be used for injection. An approved "Intent to Drill" does not approve injection authority as a Class II Injection Well in Kansas.

Before any well is used for injection purposes, the operator must file an application for injection authority in accordance with K.A.R. 82-3-401 and provide notice in accordance with K.A.R. 82-3-402. The Conservation Division must issue a written permit granting the application before commencement of injection.

The Conservation Division requirements and restrictions associated with Class II Injection are identified in K.A.R. 82-3-400 et seq of our regulations. Associated regulations governing drilling, completion and injection applications may be found in K.A.R. 82-3-135, Table I, Table II, in the Cedar Hills Sandstone Moratorium, (Docket #156,397-C), and the Eastern Kansas Surface Casing Order, (Docket #133,891-C).

If you have questions regarding the approval of injection authority, an injection application may be filed as a "Design Approval" before actual drilling and completion of the well occurs. If you have any questions or concerns regarding Class II injection wells or regulations, call the Underground Injection Control Department at 316-337-6200.

Failure to obtain commission approval before beginning injection is punishable by a penalty, shut-in of the well or both.