

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

1269397

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					
DPERATOR: License#	(Q/Q/Q/Q) feet from N / S Line of Section					
Name:	feet from E / W Line of Section					
ddress 1:	Is SECTION: Regular Irregular?					
ddress 2:	(Note: Locate well on the Section Plat on reverse side)					
City: State: Zip: +	County:					
Contact Person:	Lease Name: Well #:					
hone:	Field Name:					
CONTRACTOR: License#	Is this a Prorated / Spaced Field?					
lame:	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 MS					
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:					
If OWWO: old well information as follows:	Surface Pipe by Alternate: III					
	Length of Surface Pipe Planned to be set:					
Operator:	Length of Conductor Pipe (if any):Projected Total Depth:					
Well Name: Original Total Depth:	Frojected Total Depth:					
Original Completion Date: Original Total Depth:	Water Source for Drilling Operations:					
pirectional, Deviated or Horizontal wellbore?	Well Farm Pond Other:					
Yes, true vertical depth:	DWR Permit #:					
Bottom Hole Location:	(Note: Apply for Permit with DWR)					
(CC DKT #:	Will Cores be taken?					
	If Yes, proposed zone:					
	, p					
ΔFF						
	DAVIT					
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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:						_ Loc	cation of W	ell: Cour	nty:				
_ease:									fe	et from	N /	S Line	of Section
Nell Number:						_			fe	et from	E /	W Line	of Section
Field:						_ Se	c	Twp	;	S. R		E	W
Number of Acres at QTR/QTR/QTR/QT							Section:	Regu	lar or	Irregular			
						If S	Section is	_	, locate we			rner boun SW	dary.
	Show location			-				-					
lease ro	oads, tank b	atteries, pi	ipelines and			required b a separate 5 ft .			ce Owner N	lotice Act ((House B	ill 2032).	
	:	:	:		:	:	:			LEGE	END		
		· · · · · · · · · · · · · · · · · · ·	:					– 169: -	3 ft. O	Tank E	ocation Battery L ne Locat		
		:	:							Electri		ocation	
		:	:	•••••	:	:			EXAMPL	E :		:	
	<u>.</u> !	<u> </u>	8		<u> </u>	· : : :	• : : :						
		:	:	•••••	:								
	 : :		 : :	••••	 : :	:				97			1980' FSL
	: :	:	: :		:	:			:				
	:	:	:		:	:	:	'	SEWARD CO.	3390' FEL	_		

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

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

1269397

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	Pit is:	Fuinting					
Emergency Pit Burn Pit Settling Pit Drilling Pit	Proposed If Existing, date con	Existing	SecTwp R East West				
Workover Pit Haul-Off Pit (If WP Supply API No. or Year Drilled)	Pit capacity:		Feet from North / South Line of SectionFeet from East / West Line of Section				
		(bbls)	County				
Is the pit located in a Sensitive Ground Water A	rea? Yes 1	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	et)	Width (feet) N/A: Steel Pits				
Depth fro	om ground level to dee	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 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 splow into the pit? Yes No	pilled fluids to	Drill pits must be closed within 365 days of spud date.					
Submitted Electronically							
KCC OFFICE USE ONLY Liner Steel Pit RFAC RFAS							
Date Received: Permit Numb	ber:	Permi	it Date: Lease Inspection: Yes No				



Kansas Corporation Commission Oil & Gas Conservation Division

1269397

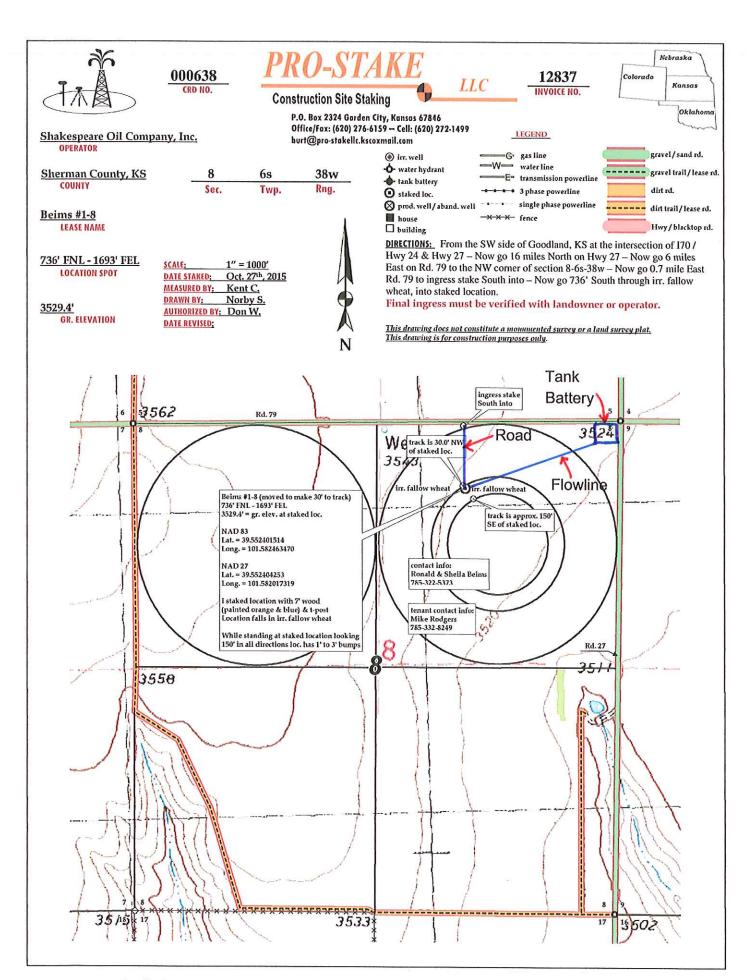
Form KSONA-1
January 2014
Form Must Be Typed
Form must be Signed
All blanks must be Filled

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:+	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 additiona						
Address 1:	owner information can be found in the records of the register of deeds for the						
Address 2:							
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.						
	Lacknowledge that hecourse 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						
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						



Preliminary non-binding estimate of tanks, roads and flowlines