

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

1272933

Form C-1

March 2010

Form must be Typed

Form must be Signed

All blanks must be Filled

### NOTICE OF INTENT TO DRILL

	Spot Description:
month day year	(Q/Q/Q/Q) Sec Twp S. R 🔲 E 🔲 V
DPERATOR: License#	foot from   N /   S Line of Section
Name:	feet from E / W Line of Sectio
ddress 1:	Is SECTION: Regular Irregular?
ddress 2:	(Note: Locate well on the Section Plat on reverse side)
City: State: Zip: +	——— County:
ontact Person:	Lease Name: Well #:
hone:	Field Name:
ONTRACTOR: License#	
lame:	Target Formation(s):
Well Drilled For: Well Class: Type Equipment:	Negroot League or unit boundary line (in footage):
	Ground Surface Flevation: feet MS
Oil Enh Rec Infield Mud Rotary	Water well within one-quarter mile:
Gas Storage Pool Ext. Air Rotary Disposal Wildcat Cable	Public water supply well within one mile:
Disposal   Wildcat   Cable     Seismic ; # of Holes   Other	Depth to bottom of fresh water:
Other:	Depth to bottom of usable water:
	Surface Pipe by Alternate: I II
If OWWO: old well information as follows:	Length of Surface Pipe Planned to be set:
Operator:	Length of Conductor Pipe (if any):
Well Name:	
Original Completion Date: Original Total Depth:	
	Water Source for Drilling Operations:
	No Well Farm Pond Other:
Yes, true vertical depth:	DWR Permit #:
Bottom Hole Location:	(Makes Apply for Domest with DIAD
	(Note: Apply for Fernix with DWK)
	(Note: Apply for Fernill William)
	(Note: Apply to Fernic with DWK
	Will Cores be taken?  If Yes, proposed zone:
CCC DKT #:	Will Cores be taken?  If Yes, proposed zone:  AFFIDAVIT
CCC DKT #:	Will Cores be taken? Yes Neft Permit Will DWN
CCC DKT #:  The undersigned hereby affirms that the drilling, completion and event is agreed that the following minimum requirements will be met:	Will Cores be taken?  If Yes, proposed zone:  AFFIDAVIT rentual plugging of this well will comply with K.S.A. 55 et. seq.
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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:	SecTwp S. R L E L W
Number of Acres attributable to well:	Is Section: Regular or Irregular
QTR/QTR/QTR of acreage:	
	If Section is Irregular, locate well from nearest corner boundary.
	Section corner used: NE NW SE SW
PLA	AT .
Show location of the well. Show footage to the nearest least	se or unit boundary line. Show the predicted locations of
lease roads, tank batteries, pipelines and electrical lines, as requir	red by the Kansas Surface Owner Notice Act (House Bill 2032).
You may attach a sepa	· · · · · · · · · · · · · · · · · · ·
Show location of the well. Show footage to the nearest leas lease roads, tank batteries, pipelines and electrical lines, as require	se or unit boundary line. Show the predicted locations of red by the Kansas Surface Owner Notice Act (House Bill 2032).

# 10 1577 ft.

# EXAMPLE SEWARD CO. 3390' FEL

**LEGEND** 

0

Well Location

Tank Battery Location Pipeline Location

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

### 1898 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

1272933

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  Settling Pit Drilling Pit  Workover Pit Haul-Off Pit  (If WP Supply API No. or Year Drilled)  Is the pit located in a Sensitive Ground Water A		Existing nstructed: (bbls)	SecTwp R East WestFeet from North / South Line of SectionFeet from East / West Line of SectionCounty  Chloride concentration: mg/l(For Emergency Pits and Settling Pits only)		
Is the bottom below ground level?  Artificial Liner?  Yes No Yes		No	How is the pit lined if a plastic liner is not used?		
Pit dimensions (all but working pits):Length (fee			Width (feet) N/A: Steel Pits No Pit		
If the pit is lined give a brief description of the li material, thickness and installation procedure.	illel		dures for periodic maintenance and determining any special monitoring.		
Distance to nearest water well within one-mile of	of pit:	Depth to shallo Source of infor	west fresh water feet. mation:		
feet Depth of water wellfeet		measured	well owner electric log KDWR		
Emergency, Settling and Burn Pits ONLY:		Drilling, Work	over and Haul-Off Pits ONLY:		
Producing Formation:		Type of materia	al utilized in drilling/workover:		
Number of producing wells on lease:		Number of world	king pits to be utilized:		
Barrels of fluid produced daily:		Abandonment	procedure:		
Does the slope from the tank battery allow all spilled fluids to flow into the pit? Yes No		Drill pits must b	pe closed within 365 days of spud date.		
Submitted Electronically					
KCC OFFICE USE ONLY Liner Steel Pit RFAC RFAS					
Date Received: Permit Num	ber:	Permi	it Date: Lease Inspection: Yes No		



### Kansas Corporation Commission Oil & Gas Conservation Division

1272933

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

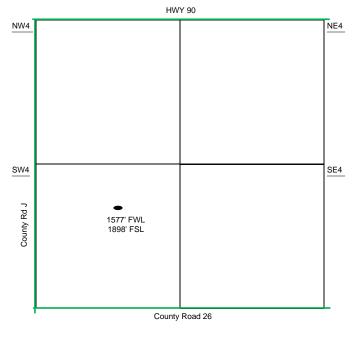
This form must be submitted with all Forms C-1 (Notice of Intent to Drill); CB-1 (Cathodic Protection Borehole Intent); T-1 (Request for Change of Operator Transfer of Injection or Surface Pit Permit); and CP-1 (Well Plugging Application).

Any such form submitted without an accompanying Form KSONA-1 will be returned.

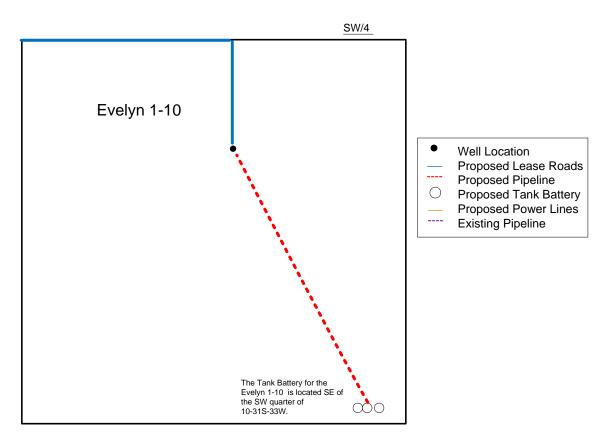
OPERATOR: License #	Well Location:		
Name:			
Address 1:	County:		
Address 2:	Lease Name: Well #:		
City: State: Zip:+	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:		
Contact Person:			
Phone: ( ) Fax: ( )	-		
Email Address:	-		
Surface Owner Information:			
Name:			
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		

## Proposed Plan of Construction Evelyn 1-10

Sec 10 T31S-R33W Seward County, KS



Sec 10 - T31S - R33W



Proposed Details of SW/4 Sec 10 – T31S – R33W

> Proposed Site Diagram Evelyn 1-10 December 22, 2015

