

| 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

| | e (5) days prior to commencing well s Surface Owner Notification Act, MUST be submitted with this form. |
|---|--|
| Expected Spud Date: | Spot Description: |
| month day year | Sec Twp S. R E W |
| | (Q/Q/Q/Q) feet from N / S Line of Section |
| OPERATOR: License# | feet from E / W Line of Section |
| Name: | Is SECTION: Regular Irregular? |
| Address 1:Address 2: | |
| City: State: Zip: + | (Note: Locate well on the Section Plat on reverse side) |
| Contact Person: | County |
| Phone: | Lease Name: Well #: |
| CONTRACTOR | Field Name: |
| CONTRACTOR: License# | is the a related repair in a. |
| 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 MSL |
| 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 |
| II 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: | |
| D: (: 1 D : (| Water Source for Drilling Operations: |
| Directional, Deviated or Horizontal wellbore? Yes No | Well Farm Pond Other: |
| If Yes, true vertical depth: | David office. |
| KCC DKT #: | (Note: Apply for Permit with DWR) |
| | vviii Cores de takeit? |
| | If Yes, proposed zone: |
| AF | FIDAVIT |
| The undersigned hereby affirms that the drilling, completion and eventual p | lugging of this well will comply with K.S.A. 55 et. seq. |
| It is agreed that the following minimum requirements will be met: | |
| 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 | h drilling rig; |
| 3. The minimum amount of surface pipe as specified below shall be se | |
| through all unconsolidated materials plus a minimum of 20 feet into the | |
| , , , | strict office on plug length and placement is necessary <i>prior to plugging</i> ; |
| The appropriate district office will be notified before well is either plug If an ALTERNATE IL COMPLETION, production pipe shall be cement | ged or production casing is certificatin, ed from below any usable water to surface within 120 DAYS of spud date. |
| | 133,891-C, which applies to the KCC District 3 area, alternate II cementing |
| must be completed within 30 days of the spud date or the well shall b | e plugged. In all cases, NOTIFY district office prior to any cementing. |
| | |
| | |
| Submitted Electronically | |
| | Remember to: |
| For KCC Use ONLY | - File Certification of Compliance with the Kansas Surface Owner Notification |
| API # 15 | Act (KSONA-1) with Intent to Drill; |
| Conductor pipe requiredfeet | - File Drill Pit Application (form CDP-1) with Intent to Drill; |
| | - File Completion Form ACO-1 within 120 days of spud date; |
| Minimum surface pipe requiredfeet per ALTIII | - File acreage attribution plat according to field proration orders; |
| Approved by: | Notify appropriate district office 48 hours prior to workover or re-entry; Submit all prior separat (CR 4) after all prior to workover or re-entry; |
| This authorization expires: | Submit plugging report (CP-4) after plugging is completed (within 60 days); Obtain written approval before disposing or injecting salt water. |
| (This authorization void if drilling not started within 12 months of approval date.) | If well will not be drilled or permit has expired (See: authorized expiration date) |
| | |

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202 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 ONLY | |
|------------------|--|
| API # 15 | |

IN ALL CASES PLOT THE INTENDED WELL ON THE PLAT BELOW

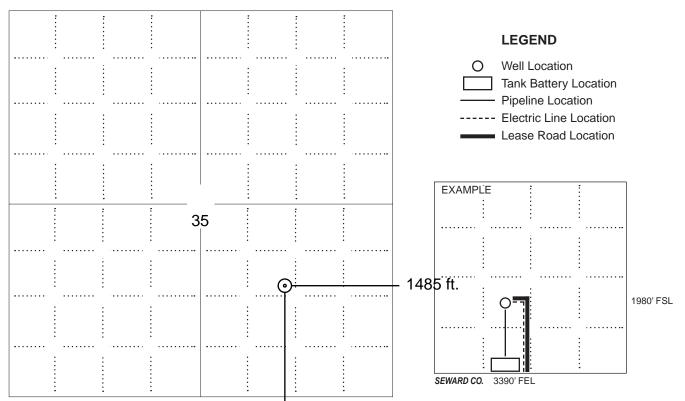
In all cases, please fully complete this side of the form. Include items 1 through 5 at the bottom of this page.

| Operator: | Location of Well: County: |
|---------------------------------------|--|
| Lease: | feet from N / S Line of Section |
| Well Number: | feet from E / W Line of Section |
| Field: | SecTwpS. R 🗌 E 🔲 W |
| 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.

1520 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

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 Haul-Off Pit (If WP Supply API No. or Year Drilled) Is the pit located in a Sensitive Ground Water A | Pit Pit capacity:(bbls) | | SecTwp R East WestFeet from North / South Line of Section Feet from East / West Line of Section County Chloride concentration: mg/l mg/l for Emergency Pits and Settling Pits only) |
| Is the bottom below ground level? Yes No | Artificial Liner? | No | How is the pit lined if a plastic liner is not used? |
| Pit dimensions (all but working pits): | Length (fee | | |
| | | | dures for periodic maintenance and determining acluding any special monitoring. |
| Distance to nearest water well within one-mile of pit: | | Depth to shallo Source of infor | west fresh water feet. nation: |
| feet Depth of water wellfeet | | 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 s | | Type of materia | over and Haul-Off Pits ONLY: all utilized in drilling/workover: king pits to be utilized: procedure: |
| flow into the pit? Yes No 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 Num | ber: | Permi | t Date: Lease Inspection: Yes No |



1307244

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 # | | | |
|--|--|--|--|
| Name: | · — — | | |
| Address 1: | • | | |
| Address 2: | Lease Name: Well #: | | |
| City: State: + | If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below: | | |
| 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:+ | _ | | |
| are preliminary non-binding estimates. The locations may be entered | ank batteries, pipelines, and electrical lines. The locations shown on the plat If 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 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 m 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 ess of the surface owner by filling out the top section of this form and e KCC, which is enclosed with this form. | | |
| 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 C | ng fee with this form. If the fee is not received with this form, the KSONA-1 P-1 will be returned. | | |
| Submitted Electronically | | | |
| I | | | |

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

IN ALL CASES PLOT THE INTENDED WELL ON THE PLAT BELOW

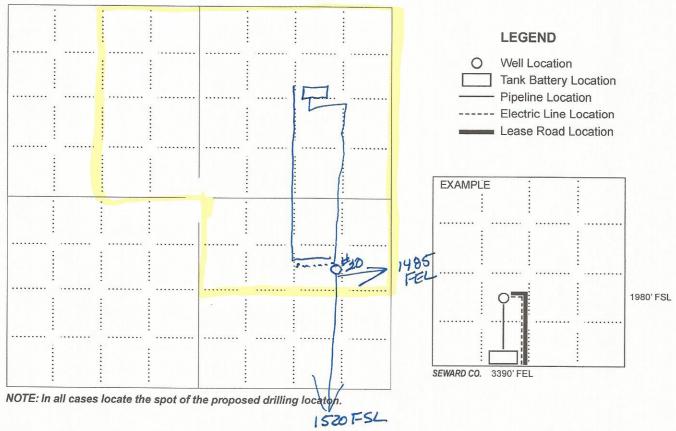
In all cases, please fully complete this side of the form. Include items 1 through 5 at the bottom of this page.

| Operator: David Wrestler | Location of Well: County: Allen | | |
|--|--|--|--|
| Lease: Ed Daniels | 1,520 feet from N / X S Line of Section | | |
| Well Number: 20 | 1,485 feet from X F / W Line of Section | | |
| Field: Humboldt /Chanute | Sec. 35 Twp. 26 S. R. 18 X E W | | |
| Number of Acres attributable to well: se nw se | 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.



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.