For KCC Use: Effective Date: District # _ SGA? Yes No

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1328813

Form C-1 March 2010 Form must be Typed Form must be Signed All blanks must be Filled

NOTICE OF INTENT TO DRILL

Must be approved by KCC five (5) days prior to commencing well

		o. oompli	oc mai are Narisas	s Surface Owner Notification Act, MUST be submitted with this form.	
Expected Spud Date:	month	day	vear	Spot Description:	
		,	,	(0/0/0/0)	E
OPERATOR: License#				feet from N / S Line	of Section
Name:					of Section
Address 1:				Is SECTION: Regular Irregular?	
Address 2:				(Note: Locate well on the Section Plat on reverse side)	
City:	State:	Zip:	+	County:	
Contact Person:				Lease Name: Well #:	
Phone:				Field Name:	
CONTRACTOR: License#.					es No
Name:				Target Formation(s):	,3110
				Nearest Lease or unit boundary line (in footage):	
Well Drilled For:	Well Class	: Туре	e Equipment:	Ground Surface Elevation:	feet MSL
Oil Enh F	Rec Infield		Mud Rotary		es No
Gas Storag	ge Pool E	xt.	Air Rotary	·	
Dispo		at	Cable		es No
Seismic ;# c				Depth to bottom of fresh water:	
Other:				Depth to bottom of usable water:	
If OWWO: old well	information as follo	ows.		Surface Pipe by Alternate: I III	
ii ovvvo. ola weli	illioittiation as loik	JWJ.		Length of Surface Pipe Planned to be set:	
Operator:				Length of Conductor Pipe (if any):	
Well Name:				Projected Total Depth:	
Original Completion Da	ite:	Original Total	Depth:		
D' (' 1 D ' (1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			□ Va a □ Na	Water Source for Drilling Operations:	
Directional, Deviated or Ho			Yes No	Well Farm Pond Other:	
If Yes, true vertical depth: _				DWR Permit #:	
Bottom Hole Location: KCC DKT #:				(Note: Apply for Permit with DWR)	
100 DR1 #				Will Cores be taken?	es No
The condens' on a different or a	- (Carra di at di a al	200 1		FIDAVIT	
-				lugging of this well will comply with K.S.A. 55 et. seq.	
It is agreed that the follow	ring minimum req	uirements wi	ill be met:		
through all unconsor 4. If the well is dry hol 5. The appropriate dis 6. If an ALTERNATE I Or pursuant to App	oved notice of inte unt of surface pip- plidated materials le, an agreement strict office will be I COMPLETION, endix "B" - Easter	ent to drill she e as specifie plus a minir between the notified before production production strikes.	all be posted on each do below shall be seen um of 20 feet into the operator and the dispreyed is either plugoipe shall be cement urface casing order #	th drilling rig; If by circulating cement to the top; in all cases surface pipe shall be set the underlying formation. If strict office on plug length and placement is necessary prior to plugging iged or production casing is cemented in; 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 le plugged. In all cases, NOTIFY district office prior to any cementing.	€.
ubmitted Electror	nically			Remember to:	
For KCC Use ONLY				- File Certification of Compliance with the Kansas Surface Owner Notifica	ation
API # 15				Act (KSONA-1) with Intent to Drill;	
				- File Drill Pit Application (form CDP-1) with Intent to Drill;	
Conductor pipe requiredfeet				- 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; 	
This authorization expires	s:			- Submit plugging report (CP-4) after plugging is completed (within 60 day	rs);
(This authorization void if di	rilling not started wit	thin 12 months	s of approval date.)	Obtain written approval before disposing or injecting salt water. Wall will got be drilled as a seried to a seried t	-1-4.
				 If well will not be drilled or permit has expired (See: authorized expiration please check the box below and return to the address below. 	date)
Spud date:	Agent:			produce origin, the box below and return to the address below.	_

Well will not be drilled or Permit Expired Date: _

Signature of Operator or Agent:

Side	IWA

1328813

For KCC Use ONLY	
API # 15	

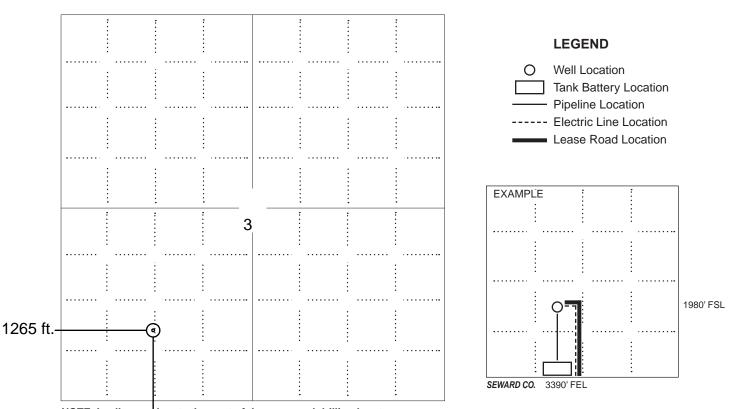
IN ALL CASES PLOT THE INTENDED WELL ON THE PLAT BELOW

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.

965 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:	Pit is:				
Emergency Pit Burn Pit Settling Pit Drilling Pit	Proposed Existing		SecTwpR East West		
Workover Pit Haul-Off Pit	If Existing, date constructed:		Feet from North / South Line of Section		
(If WP Supply API No. or Year Drilled)	Pit capacity:(bbls)		Feet from East / West Line of Section		
			County		
Is the pit located in a Sensitive Ground Water A	rea? Yes	No	Chloride concentration: mg/l (For Emergency Pits and Settling Pits only)		
Is the bottom below ground level?	Artificial Liner?		How is the pit lined if a plastic liner is not used?		
Yes No	Yes 1	No			
Pit dimensions (all but working pits):	Length (fe	et)	Width (feet) N/A: Steel Pits		
Depth fro	m ground level to dea	epest point:	(feet) No Pit		
			dures for periodic maintenance and determining cluding any special monitoring.		
			0 , ,		
Distance to nearest water well within one-mile of	of nit	Depth to shallo	west fresh water feet.		
	p	Source of inform	nation:		
feet Depth of water well	feet	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	l utilized in drilling/workover:		
Number of producing wells on lease:		Number of work	king pits to be utilized:		
Barrels of fluid produced daily:		Abandonment	procedure:		
Does the slope from the tank battery allow all s flow into the pit? Yes No	pilled fluids to	Drill pits must b	e closed within 365 days of spud date.		
	-				
Submitted Electronically					
Submitted Electronically					
KCC OFFICE USE ONLY Liner Steel Pit RFAC RFAS					
Liner Steel Pit RFAC Date Received: Permit Number: Permit Date: Permit Date: Lease Inspection:					
Date Received: Permit Numl	ber:	Permi	t Date: Lease Inspection:		

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1328813

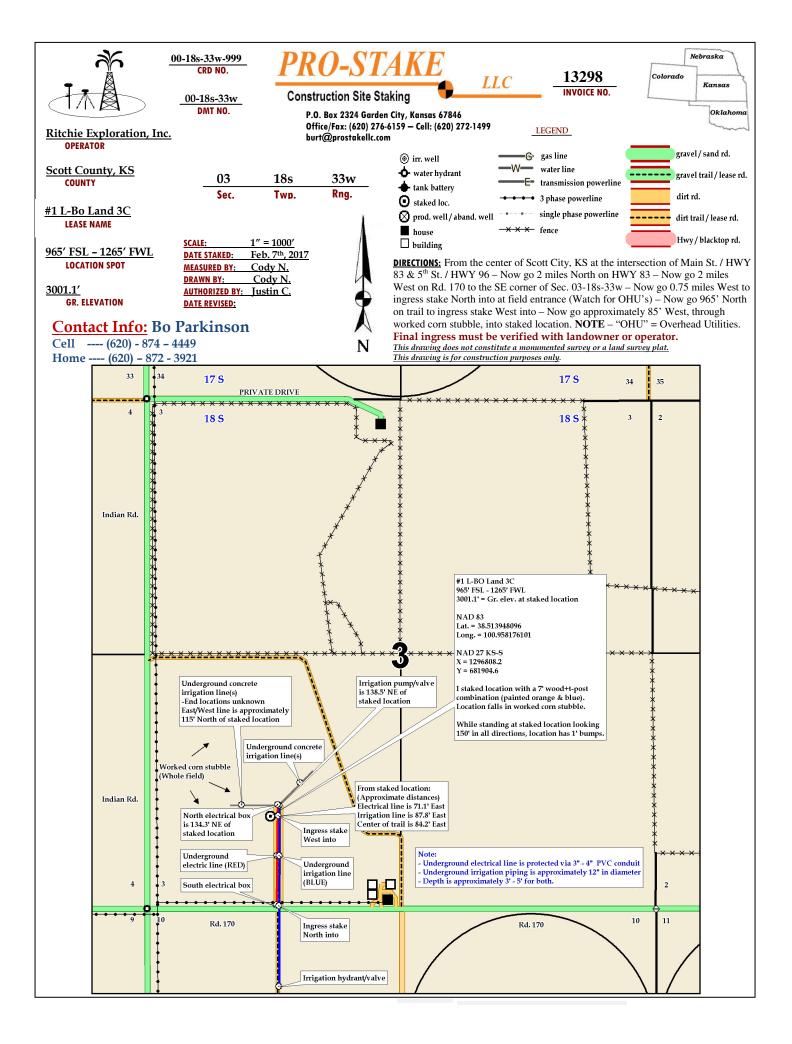
Form KSONA-1
January 2014
Form Must Be Typed
Form must be Signed
All blanks must be Filled

CERTIFICATION OF COMPLIANCE WITH THE KANSAS SURFACE OWNER NOTIFICATION ACT

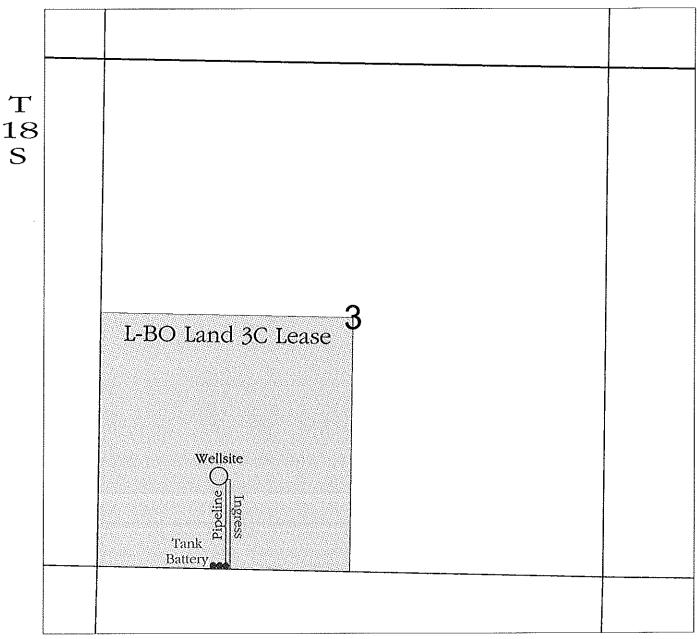
This form must be submitted with all Forms C-1 (Notice of Intent to Drill); CB-1 (Cathodic Protection Borehole Intent); T-1 (Request for Change of Operator Transfer of Injection or Surface Pit Permit); and CP-1 (Well Plugging Application).

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:	SecTwpS. R 🔲 East 🗌 West		
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:	When filing a Form T-1 involving multiple surface owners, attach an additional		
Address 1:	owner information can be found in the records of the register of deeds for the		
Address 2:			
City: State: Zip:+			
the KCC with a plat showing the predicted locations of lease roads, tank are preliminary non-binding estimates. The locations may be entered of Select one of the following: □ I certify that, pursuant to the Kansas Surface Owner Notice A owner(s) of the land upon which the subject well is or will be lead.	dic Protection Borehole Intent), you must supply the surface owners and a batteries, pipelines, and electrical lines. The locations shown on the plat in the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. act (House Bill 2032), I have provided the following to the surface pocated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form		
CP-1 that I am filing in connection with this form; 2) if the form I form; and 3) my operator name, address, phone number, fax, a	peing filed is a Form C-1 or Form CB-1, the plat(s) required by this nd email address.		
KCC will be required to send this information to the surface ov	cknowledge that, because I have not provided this information, the vner(s). To mitigate the additional cost of the KCC performing this of the surface owner by filling out the top section of this form and 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 CP-	fee with this form. If the fee is not received with this form, the KSONA-1 will be returned.		
Submitted Electronically			







SCALE = 1 : 12,000 SCOTT COUNTY, KANSAS