

Spud date: \_

## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1355977

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 year	Spot Description:
monar day your	Sec Twp S. R E V
OPERATOR: License#	feet from N / S Line of Section
Name:	feet from E / W Line of Section
Address 1:	Is SECTION: Regular Irregular?
Address 2:	(Note: Locate well on the Section Plat on reverse side)
City:	County:
Contact Person:	Lease Name: Well #:
Phone:	Field Name:
CONTRACTOR: License#	Is this a Prorated / Spaced Field?
Name:	Target Formation(s):
Well Drilled For: Well Class: Type Equipment:	Nearest Lease or unit boundary line (in footage):
	Ground Surface Elevation:feet MS
Oil Enh Rec Infield Mud Rotary	Water well within one-quarter mile:
Gas Storage Pool Ext. Air Rotary	Public water supply well within one mile:
Disposal Wildcat Cable	Depth to bottom of fresh water:
Seismic ; # of Holes Other Other:	Depth to bottom of usable water:
Ou161	Surface Pipe by Alternate: I II
If OWWO: old well information as follows:	Length of Surface Pipe Planned to be set:
Onesastan	Length of Conductor Pipe (if any):
Operator:	Projected Total Depth:
Well Name: Original Total Depth:	Formation at Total Depth:
Original Completion Date Original Total Depth	Water Source for Drilling Operations:
Directional, Deviated or Horizontal wellbore?	Well Farm Pond Other:
f Yes, true vertical depth:	
Bottom Hole Location:	DWR Permit #:(Note: Apply for Permit with DWR )
CCC DKT #:	Will Cores be taken?
	If Yes, proposed zone:
	11 100, proposed 2011c.
AFF	IDAVIT
The undersigned hereby affirms that the drilling, completion and eventual plug	gging of this well will comply with K.S.A. 55 et. seq.
t is agreed that the following minimum requirements will be met:	
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Notify the appropriate district office <i>prior</i> to spudding of well;	drilling rig;
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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:

	W

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	. "	: 1	- 1	9	•	•

1980' FSL

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
QTR/QTR/QTR of acreage:	
	If Section is Irregular, locate well from nearest corner boundary.  Section corner used: NE NW SE SW
Show location of the well. Show footage to the nearest lease roads, tank batteries, pipelines and electrical lines, as required You may attach a sep	ase or unit boundary line. Show the predicted locations of ired by the Kansas Surface Owner Notice Act (House Bill 2032).
	LEGEND
	O Well Location  Tank Battery Location  Pipeline Location  Electric Line Location  Lease Road Location
15	EXAMPLE

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

1153 ft.

439 ft.

SEWARD CO. 3390' FEL

#### 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.
- $2. \ \, \text{The distance of the proposed drilling location from the south / north and east / west outside section lines}.$
- 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

	Sui	omit in Duplicat	nte	
Operator Name:	r 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  Is the bottom below ground level?  Yes No  Pit dimensions (all but working pits):  Depth fro	Artificial Liner?  Yes No		SecTwp R East West Section Feet from North / South Line of Section Feet from East / West Line of Section County Chloride concentration: mg/l (For Emergency Pits and Settling Pits only)  How is the pit lined if a plastic liner is not used?  Width (feet) N/A: Steel Pits No Pit	n '
If the pit is lined give a brief description of the li material, thickness and installation procedure.		liner integrity, ir	edures for periodic maintenance and determining including any special monitoring.	
Source of infor				
feet Depth of water well	feet	measured		
Emergency, Settling and Burn Pits ONLY:		_	cover and Haul-Off Pits ONLY:	
			ial utilized in drilling/workover:	-
		rking pits to be utilized:	-	
Does the slope from the tank battery allow all spilled fluids to		t be closed within 365 days of spud date.		
Submitted Electronically				
KCC OFFICE USE ONLY				
Date Received: Permit Num	ber:	Permi	Liner Steel Pit RFAC RFAS	

### Kansas Corporation Commission Oil & Gas Conservation Division

1355977

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

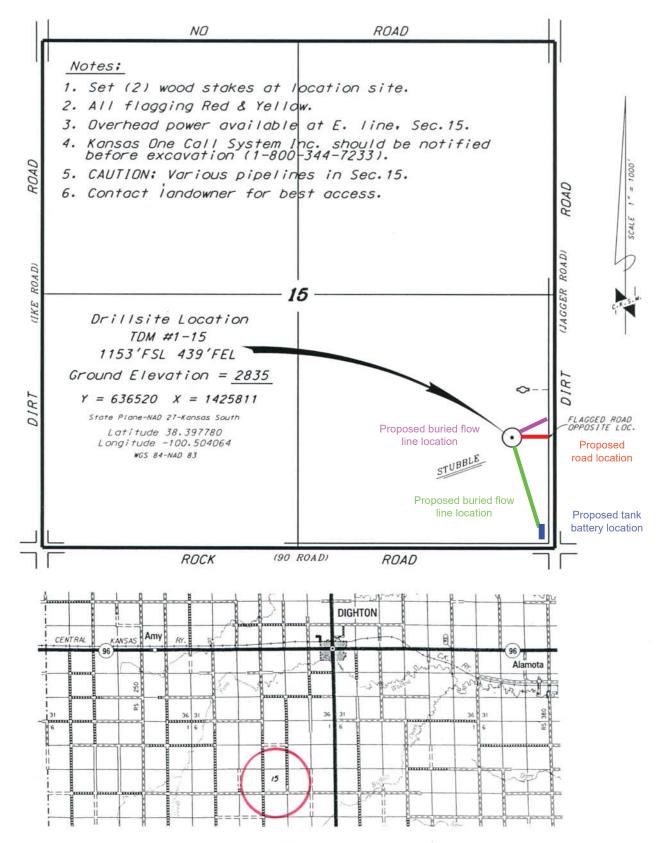
# CERTIFICATION OF COMPLIANCE WITH THE KANSAS SURFACE OWNER NOTIFICATION ACT

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 (C	athodic 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 filling 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 additional	
Address 1: sheet listing all of the information to the left for each su owner information can be found in the records of the re-		
Address 2:	county, and in the real estate property tax records of the county treasurer.	
City: State: Zip:+		
	batteries, pipelines, and electrical lines. The locations shown on the plat the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.  ct (House Bill 2032), I have provided the following to the surface	
	cated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form eing 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 own	sknowledge that, because I have not provided this information, the ner(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 CC, 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-1	fee with this form. If the fee is not received with this form, the KSONA-1 will be returned.	
Submitted Electronically		

LARSON ENGINEERING, INC. TOM LEASE SE. 1/4. SECTION 15. T19S. R29W LANE COUNTY. KANSAS



Controlling data is based upon the best maps and photographs available to us and upon a regular section of land containing 640 acres.

May 25, 2017

Approximate section lines were determined using the normal standard of care of oilfield surveyors procticing in the state of Kansas. The section corners, which establish the precise section lines, were not necessarily located, and the exact location of the drilliste location in the section is not quaranteed. Therefore, the operator securing this service and accepting this plat and all other parties relying thereon agree to hold Central Kansas Diffield Services, Inc., its officers and employees normless from all losses, costs and expenses and said entities released from any liability from incidental or consequential damages.