

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

KANSAS CORPORATION COMMISSION 1357027  
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**

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

Form KSONA-1, Certification of Compliance with the Kansas Surface Owner Notification Act, MUST be submitted with this form.

Expected Spud Date: \_\_\_\_\_  
month day year

OPERATOR: License# \_\_\_\_\_  
Name: \_\_\_\_\_  
Address 1: \_\_\_\_\_  
Address 2: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ + \_\_\_\_\_  
Contact Person: \_\_\_\_\_  
Phone: \_\_\_\_\_

CONTRACTOR: License# \_\_\_\_\_  
Name: \_\_\_\_\_

| Well Drilled For:                                   | Well Class:                       | Type Equipment:                     |
|---|-----------------------------------|-------------------------------------|
| <input type="checkbox"/> Oil                        | <input type="checkbox"/> Enh Rec  | <input type="checkbox"/> Infield    |
| <input type="checkbox"/> Gas                        | <input type="checkbox"/> Storage  | <input type="checkbox"/> Pool Ext.  |
|   | <input type="checkbox"/> Disposal | <input type="checkbox"/> Wildcat    |
| <input type="checkbox"/> Seismic ; _____ # of Holes | <input type="checkbox"/> Other    | <input type="checkbox"/> Mud Rotary |
| <input type="checkbox"/> Other: _____               |                                   | <input type="checkbox"/> Air Rotary |
|   |                                   | <input type="checkbox"/> Cable      |

If OWWO: old well information as follows:

Operator: \_\_\_\_\_  
Well Name: \_\_\_\_\_  
Original Completion Date: \_\_\_\_\_ Original Total Depth: \_\_\_\_\_

Directional, Deviated or Horizontal wellbore?  Yes  No  
If Yes, true vertical depth: \_\_\_\_\_  
Bottom Hole Location: \_\_\_\_\_  
KCC DKT #: \_\_\_\_\_

Spot Description: \_\_\_\_\_  
\_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  E  W  
(Q/Q/Q/Q) \_\_\_\_\_ feet from  N /  S Line of Section  
\_\_\_\_\_ feet from  E /  W Line of Section  
Is SECTION:  Regular  Irregular?

(Note: Locate well on the Section Plat on reverse side)

County: \_\_\_\_\_  
Lease Name: \_\_\_\_\_ Well #: \_\_\_\_\_  
Field Name: \_\_\_\_\_  
Is this a Prorated / Spaced Field?  Yes  No  
Target Formation(s): \_\_\_\_\_  
Nearest Lease or unit boundary line (in footage): \_\_\_\_\_  
Ground Surface Elevation: \_\_\_\_\_ feet MSL  
Water well within one-quarter mile:  Yes  No  
Public water supply well within one mile:  Yes  No  
Depth to bottom of fresh water: \_\_\_\_\_  
Depth to bottom of usable water: \_\_\_\_\_  
Surface Pipe by Alternate:  I  II  
Length of Surface Pipe Planned to be set: \_\_\_\_\_  
Length of Conductor Pipe (if any): \_\_\_\_\_  
Projected Total Depth: \_\_\_\_\_  
Formation at Total Depth: \_\_\_\_\_  
Water Source for Drilling Operations:  
 Well  Farm Pond  Other: \_\_\_\_\_  
DWR Permit #: \_\_\_\_\_  
(Note: Apply for Permit with DWR )  
Will Cores be taken?  Yes  No  
If Yes, proposed zone: \_\_\_\_\_

**AFFIDAVIT**

The undersigned hereby affirms that the drilling, completion and eventual plugging of this well will comply with K.S.A. 55 et. seq.

It is agreed that the following minimum requirements will be met:

1. Notify the appropriate district office **prior** to spudding of well;
2. A copy of the approved notice of intent to drill **shall be** posted on each drilling rig;
3. The minimum amount of surface pipe as specified below **shall be set** by circulating cement to the top; in all cases surface pipe **shall be set** through all unconsolidated materials plus a minimum of 20 feet into the underlying formation.
4. If the well is dry hole, an agreement between the operator and the district office on plug length and placement is necessary **prior to plugging**;
5. The appropriate district office will be notified before well is either plugged or production casing is cemented in;
6. If an ALTERNATE II COMPLETION, production pipe shall be cemented from below any usable water to surface within **120 DAYS** of spud date. Or pursuant to Appendix "B" - Eastern Kansas surface casing order #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 be plugged. **In all cases, NOTIFY district office** prior to any cementing.

**Submitted Electronically**

**For KCC Use ONLY**  
API # 15 - \_\_\_\_\_  
Conductor pipe required \_\_\_\_\_ feet  
Minimum surface pipe required \_\_\_\_\_ feet per ALT.  I  II  
Approved by: \_\_\_\_\_  
**This authorization expires:** \_\_\_\_\_  
(This authorization void if drilling not started within 12 months of approval date.)  
Spud date: \_\_\_\_\_ Agent: \_\_\_\_\_

**Remember to:**

- File Certification of Compliance with the Kansas Surface Owner Notification Act (KSONA-1) with Intent to Drill;
- File Drill Pit Application (form CDP-1) with Intent to Drill;
- File Completion Form ACO-1 within 120 days of spud date;
- File acreage attribution plat according to field proration orders;
- Notify appropriate district office 48 hours prior to workover or re-entry;
- Submit plugging report (CP-4) after plugging is completed (within 60 days);
- Obtain written approval before disposing or injecting salt water.
- If well will not be drilled or permit has expired (See: authorized expiration date) 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: \_\_\_\_\_

E  
 W

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: \_\_\_\_\_

Lease: \_\_\_\_\_

Well Number: \_\_\_\_\_

Field: \_\_\_\_\_

Number of Acres attributable to well: \_\_\_\_\_

QTR/QTR/QTR/QTR of acreage: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Location of Well: County: \_\_\_\_\_

\_\_\_\_\_ feet from  N /  S Line of Section

\_\_\_\_\_ feet from  E /  W Line of Section

Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  E  W

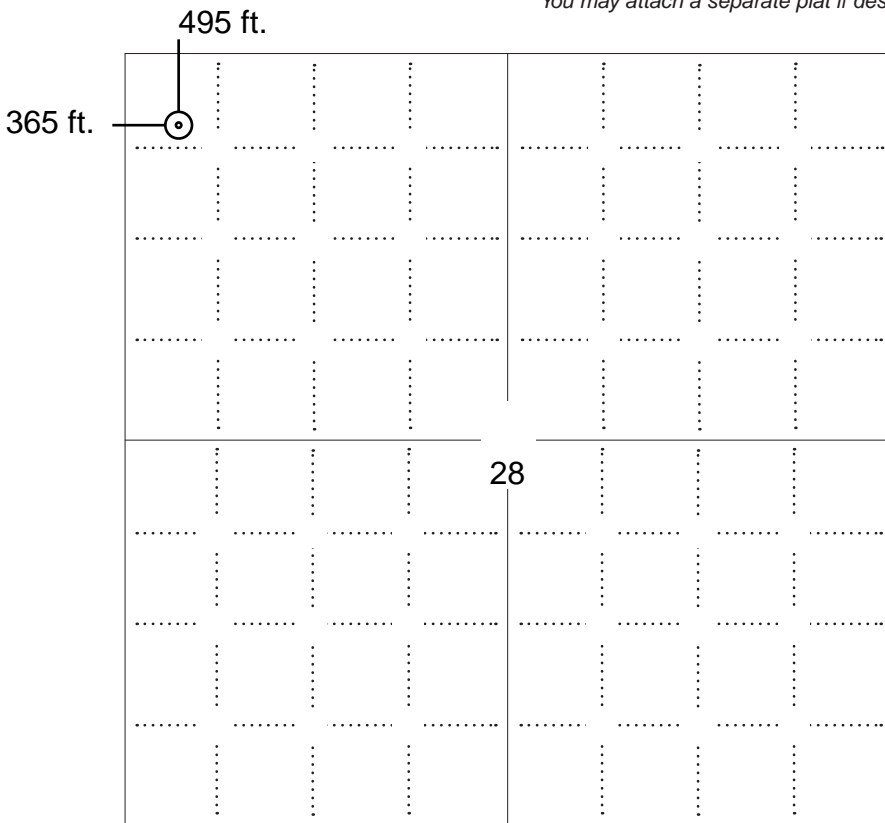
Is Section:  Regular or  Irregular

**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.



**LEGEND**

- Well Location
- Tank Battery Location
- Pipeline Location
- Electric Line Location
- Lease Road Location



**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.

**APPLICATION FOR SURFACE PIT**

*Submit in Duplicate*

|   |  |   |  |
|---|--|---|--|
| Operator Name: _____  |  | License Number: _____   |  |
| Operator Address: _____   |  |   |  |
| Contact Person: _____   |  | Phone Number: _____   |  |
| Lease Name & Well No.: _____  |  | Pit Location (QQQQ):<br>_____-_____-_____-_____   |  |
| Type of Pit:<br><input type="checkbox"/> Emergency Pit <input type="checkbox"/> Burn Pit<br><input type="checkbox"/> Settling Pit <input type="checkbox"/> Drilling Pit<br><input type="checkbox"/> Workover Pit <input type="checkbox"/> Haul-Off Pit<br><i>(If WP Supply API No. or Year Drilled)</i>             |  | Pit is:<br><input type="checkbox"/> Proposed <input type="checkbox"/> Existing<br>If Existing, date constructed: _____<br>Pit capacity: _____ (bbls)  |  |
| Is the pit located in a Sensitive Ground Water Area? <input type="checkbox"/> Yes <input type="checkbox"/> No   |  | Chloride concentration: _____ mg/l<br><i>(For Emergency Pits and Settling Pits only)</i>  |  |
| Is the bottom below ground level?<br><input type="checkbox"/> Yes <input type="checkbox"/> No   |  | Artificial Liner?<br><input type="checkbox"/> Yes <input type="checkbox"/> No   |  |
| How is the pit lined if a plastic liner is not used? _____  |  |   |  |
| Pit dimensions (all but working pits): _____ Length (feet)    _____ Width (feet) <input type="checkbox"/> N/A: Steel Pits<br>Depth from ground level to deepest point: _____ (feet) <input type="checkbox"/> No Pit   |  |   |  |
| If the pit is lined give a brief description of the liner material, thickness and installation procedure.   |  | Describe procedures for periodic maintenance and determining liner integrity, including any special monitoring.   |  |
| Distance to nearest water well within one-mile of pit:<br>_____ feet    Depth of water well _____ feet  |  | Depth to shallowest fresh water _____ feet.<br>Source of information:<br><input type="checkbox"/> measured <input type="checkbox"/> well owner <input type="checkbox"/> electric log <input type="checkbox"/> KDWR                                    |  |
| <b>Emergency, Settling and Burn Pits ONLY:</b><br>Producing Formation: _____<br>Number of producing wells on lease: _____<br>Barrels of fluid produced daily: _____<br>Does the slope from the tank battery allow all spilled fluids to flow into the pit? <input type="checkbox"/> Yes <input type="checkbox"/> No |  | <b>Drilling, Workover and Haul-Off Pits ONLY:</b><br>Type of material utilized in drilling/workover: _____<br>Number of working pits to be utilized: _____<br>Abandonment procedure: _____<br>Drill pits must be closed within 365 days of spud date. |  |
| Submitted Electronically  |  |   |  |

|                            |  |   |  |
|----------------------------|--|---|--|
| <b>KCC OFFICE USE ONLY</b> |  |   |  |
| Date Received: _____       |  | Permit Number: _____  |  |
| Permit Date: _____         |  | Lease Inspection: <input type="checkbox"/> Yes <input type="checkbox"/> No  |  |
|                            |  | <input type="checkbox"/> Liner <input type="checkbox"/> Steel Pit <input type="checkbox"/> RFAC <input type="checkbox"/> RFAS |  |

## 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: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ + \_\_\_\_\_  
Contact Person: \_\_\_\_\_  
Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ Fax: ( \_\_\_\_\_ ) \_\_\_\_\_  
Email Address: \_\_\_\_\_

Well Location:  
\_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_ Sec. \_\_\_\_ Twp. \_\_\_\_ S. R. \_\_\_\_  East  West  
County: \_\_\_\_\_  
Lease Name: \_\_\_\_\_ Well #: \_\_\_\_\_

*If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:*

### Surface Owner Information:

Name: \_\_\_\_\_  
Address 1: \_\_\_\_\_  
Address 2: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ + \_\_\_\_\_

*When filing a Form T-1 involving multiple surface owners, attach an additional sheet listing all of the information to the left for each surface owner. Surface owner information can be found in the records of the register of deeds for the county, and in the real estate property tax records of the county treasurer.*

*If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.*

### Select one of the following:

- I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 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 being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address.
- I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I must provide the name and address of the surface owner by filling out the top section of this form and that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.

*If choosing the second option, submit payment of the \$30.00 handling fee with this form. If the fee is not received with this form, the KSONA-1 form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be returned.*

I Submitted Electronically

AFFIDAVIT OF COMPLETION FORM

ACO-1

This form shall be filed in triplicate with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within ten days after the completion of the well, regardless of how the well was completed. Circle one: Oil, gas, dry, SWD, OWWO, injection. Type and complete ALL sections. Applications must be filed for dual completion, commingling, salt water disposal and injection. Attach logs (i.e. electrical log, sonic log, gamma ray neutron log, etc.) KCC#-(316)263-3208

RECEIVED  
STATE CORPORATION COMMISSION  
JAN - 9 1982  
CONSERVATION DIVISION  
Wichita, Kansas

OPERATOR Heckert Construction Co., Inc.

API NO. Unknown

ADDRESS Rt. 2, Box 6-B

COUNTY Marion

Pittsburg, Kansas 66762

FIELD Covert-Sellers

\*\*CONTACT PERSON Charles Heckert

PROD. FORMATION Viola

PHONE 316/231-6090

LEASE Dannenfelser

PURCHASER Total Pipeline Corporation

WELL NO. 1

ADDRESS P. O. Box 187

WELL LOCATION NW $\frac{1}{4}$  NW $\frac{1}{4}$  NW $\frac{1}{4}$

Potwin, Kansas 67123

495 Ft. from N Line and

365 Ft. from W Line of

DRILLING M & D Drilling

CONTRACTOR

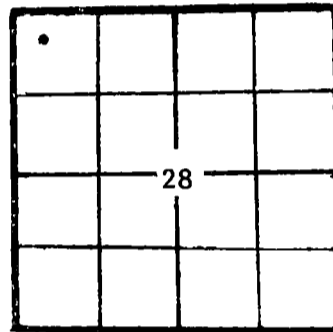
ADDRESS Mound City, Kansas

the NW $\frac{1}{4}$  SEC. 28 TWP. 21 RGE. 4 E

PLUGGING N/A

CONTRACTOR

ADDRESS



WELL PLAT

KCC   
KGS   
MISC   
(Office Use)

TOTAL DEPTH 2527 PBSD

SPUD DATE Aug 4, 1980 DATE COMPLETED Dec. 30, 1981

ELEV: GR 1304 DF 1309 KB 1309

DRILLED WITH (CABLE) (ROTARY) (AIR) TOOLS (New) / (Used) casing.

CASING RECORD

| Report of all strings set — surface, intermediate, production, etc. |                   |                           |                |               |             |       |                            |
|---|-------------------|---------------------------|----------------|---------------|-------------|-------|----------------------------|
| Purpose of string   | Size hole drilled | Size casing set (in O.D.) | Weight lbs/ft. | Setting depth | Type cement | Sacks | Type and percent additives |
| Surface   | 12 1/4            | 8 5/8                     | 28             | 244           | Portland    | 150   |                            |
| Production  | 7 7/8             | 5 1/2                     | 14.0           | 2465          | Portland    | 125   |                            |
|   |                   |                           |                |               |             |       |                            |
|   |                   |                           |                |               |             |       |                            |

| LINER RECORD  |               |               | PERFORATION RECORD |             |                |
|---------------|---------------|---------------|--------------------|-------------|----------------|
| Top, ft.      | Bottom, ft.   | Sacks cement  | Shots per ft.      | Size & type | Depth Interval |
| none          | none          |               | 2                  | unknown     | 2384 - 2389    |
| TUBING RECORD |               |               |                    |             |                |
| Size          | Setting depth | Packer set at |                    |             |                |
| 2 7/8         | 2378          | none          |                    |             |                |

| ACID, FRACTURE, SHOT, CEMENT SQUEEZE RECORD |                        |
|---|------------------------|
| Amount and kind of material used            | Depth interval treated |
| none  |                        |
|   |                        |
|   |                        |

|   |   |                             |
|---|---|-----------------------------|
| Date of first production<br><u>12-14-81</u>                       | Producing method (flowing, pumping, gas lift, etc.)<br><u>Pumping</u> | Gravity<br><u>31</u>        |
| RATE OF PRODUCTION PER 24 HOURS                                   | Oil <u>10</u> bbls.   | Gas <u>0</u> MCF            |
|   | Water <u>67</u> %   | Gas-oil ratio <u>0</u> CFPB |
| Disposition of gas (vented, used on lease or sold)<br><u>none</u> | Perforations<br><u>2384 -2389 10 shots</u>                            |                             |

\*\*The person who can be reached by phone regarding any questions concerning this information. A witnessed initial test by the Commission is required if the well produces more than 25 BOPD or is located in a Basic Order Pool.

Name of lowest fresh water producing stratum \_\_\_\_\_ Depth 70'  
 Estimated height of cement behind Surface Pipe 1500  
 DV USED? No

WELL LOG

| Formation Description, Contents, etc. | Top | Bottom | Name | Depth |
|---------------------------------------|-----|--------|------|-------|
| OWWO-No logs available                |     |        |      |       |

**A F F I D A V I T**

STATE OF Kansas, COUNTY OF Crawford SS, \_\_\_\_\_

Charles M. Heckert OF LAWFUL AGE, BEING FIRST DULY SWORN UPON HIS OATH,  
 DEPOSES THAT HE IS Vice President (~~owner~~) (OF) Heckert Construction Co., Inc.  
 OPERATOR OF THE Dannenfelser LEASE, AND IS DULY AUTHORIZED TO MAKE  
 THIS AFFIDAVIT FOR AND ON THE BEHALF OF SAID OPERATOR, THAT WELL NO. 1 ON  
 SAID LEASE HAS BEEN COMPLETED AS OF THE 30 DAY OF December, 19 81, AND THAT  
 ALL INFORMATION ENTERED HEREIN WITH RESPECT TO SAID WELL IS TRUE AND CORRECT.

FURTHER AFFIANT SAITH NOT.

SUBSCRIBED AND SWORN BEFORE ME THIS 6<sup>th</sup> DAY OF January 19 82

(S) Charles M. Heckert  
Darla J. Mitchell  
 NOTARY PUBLIC

MY COMMISSION EXPIRES: Aug 9, 1983

DARLA J. MITCHELL  
 NOTARY PUBLIC  
 State of Kansas  
 My Appointment Expires  
Aug 9, 1983

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: K-Bar Oil  
 Lease: Dannenfelser  
 Well Number: #1  
 Field: Covert-Sellers  
 Number of Acres attributable to well: \_\_\_\_\_  
 QTR/QTR/QTR/QTR of acreage: \_\_\_\_\_

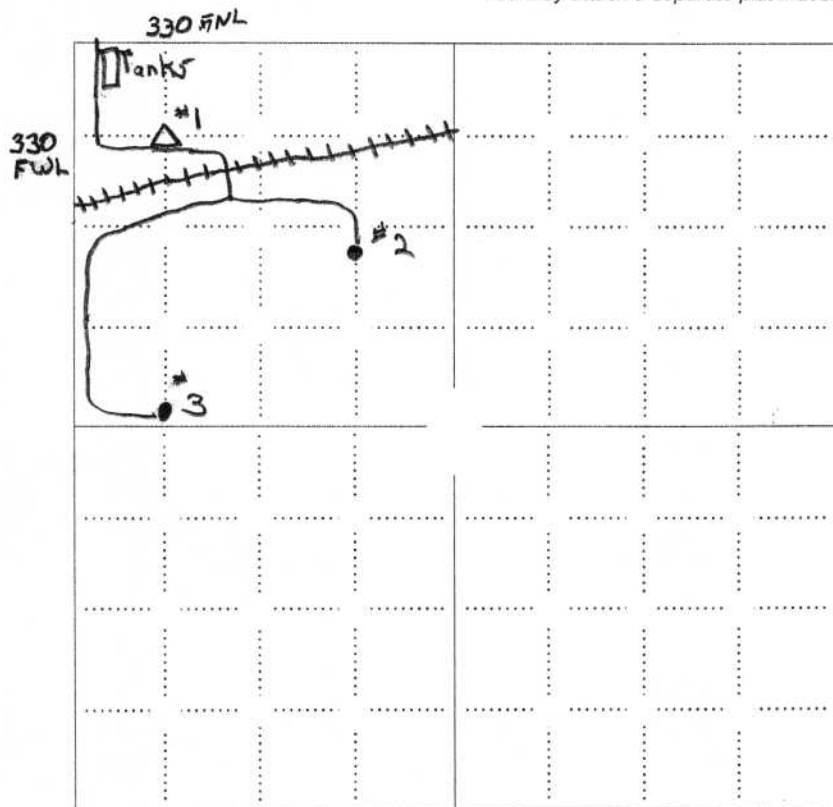
Location of Well: County: NW NW NW  
 \_\_\_\_\_ 330 feet from  N /  S Line of Section  
 \_\_\_\_\_ 330 feet from  E /  W Line of Section  
 Sec. 28 Twp. 21 S. R. 4  E  W

Is Section:  Regular or  Irregular

If Section is Irregular, locate well from nearest corner boundary.  
 Section corner used:  NE  NW  SE  SW

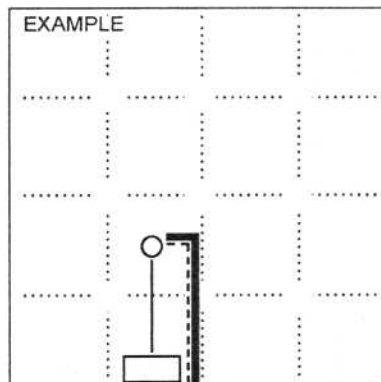
**PLAT**

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.



**LEGEND**

- Well Location
- Tank Battery Location
- Pipeline Location
- Electric Line Location
- Lease Road Location



1980' FSL

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

**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: (CO-7 for oil wells; CG-8 for gas wells).
5. The predicted locations of lease roads, tank batteries, pipelines, and electrical lines.

Conservation Division  
266 N. Main St., Ste. 220  
Wichita, KS 67202-1513



Phone: 316-337-6200  
Fax: 316-337-6211  
<http://kcc.ks.gov/>

Pat Apple, Chairman  
Shari Feist Albrecht, Commissioner  
Jay Scott Emler, Commissioner

Sam Brownback, Governor

June 12, 2017

Hal Krehbiel  
Krehbiel, Hal Gene and Alice dba K-Bar Oil  
1219 TURKEY CRK DR  
MCPHERSON, KS 67460-9765

Re: Drilling Pit Application  
Dannenfesler 1  
NW/4 Sec.28-21S-04E  
Marion County, Kansas

Dear Hal Krehbiel:

District staff has inspected the above referenced location and has determined that an unsealed condition will present a pollution threat to water resources.

District staff has recommended that the reserve pit be lined with bentonite or native clay, constructed **without slots**, the bottom shall be flat and reasonably level and the free fluids must be removed. The fluids are to be removed from the reserve pit after drilling operations have ceased.

**If production casing is set all completion fluids shall be removed from the working pits daily. NO completion fluids or non-exempt wastes shall be placed in the reserve pit.**

The fluids should be taken to an authorized disposal well. Please call the District Office at (316) 337-7400 when the fluids have been removed. Please file form CDP-5 (August 2008), Exploration and Production Waste Transfer, through KOLAR within 30 days of fluid removal.

**A copy of this letter should be posted in the doghouse along with the approved Intent to Drill.** If you have any questions or concerns please feel free to contact the District Office at (316) 337-7400.