

## Kansas Corporation Commission Oil & Gas Conservation Division

1372050

Form CB-1 Oct 2016 Form must be Typed Form must be Signed All blanks must be Filled

≶

### CATHODIC PROTECTION BOREHOLE INTENT

Must be approved by the KCC sixty (60) 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:	Spot Description:
month day year	
	(0/0/0/0)
OPERATOR: License#	
Name:	
Address 1:	Is SECTION: Regular Irregular?
Address 2:	(Check directions from nearest outside corner boundries)
City:	County:
Contact Person:	Facility Name:
Phone:	Borehole Number:
CONTRACTOR: License#	Ground Surface Elevation: MSI
Name:	Cathodic Borehole Total Depth: feet
Type Drilling Equipment:	Depth to Bedrock: feet
☐ Air Rotary ☐ Other	Water Information
Construction Features	Aquifer Penetration: None Single Multiple
Length of Cathodic Surface (Non-Metallic) Casing	Depth to bottom of fresh water:
Planned to be set: feet	Depth to bottom of usable water:
Length of Conductor pipe (if any): feet	Water well within one-quarter mile: Yes No
Surface casing borehole size: inches	Public water supply well within one mile:Yes No
Cathodic surface casing size: inches	Water Source for Drilling Operations:
Cathodic surface casing centralizers set at depths of:;;	Well Farm Pond Stream Other
;;;;;	Water Well Location:
Cathodic surface casing will terminate at:	DWR Permit #
Above surface  Surface Vault  Below Surface Vault	Standard Dimension Ratio (SDR) is =
Pitless casing adaptor will be used: Yes No Depthfeet	(Cathodic surface csg. O.D. in inches / MWT in inches = SDR)
Anode installation depths are:;; ;;	Annular space between borehole and casing will be grouted with:
	Concrete Neat Cement Bentonite Cement Bentonite Clay Anode vent pipe will be set at: feet above surface
;;;;;;	Anode conductor (backfill) material TYPE:
	Depth of BASE of Backfill installation material:
	Depth of TOP of Backfill installation material:
AFFIDAVIT	Borehole will be Pre-Plugged? Yes No
The undersigned hereby affirms that the drilling, completion and eventual plugging	
of this well will comply with K.S.A. 55-101 et. seq.	·
t is agreed that the following minimum requirements will be met:	
Notify the appropriate District office prior to spudding and again before plugging the	well. An agreement between the operator and the District Office on plugs
and placement is necessary prior to plugging. In all cases, notify District Office prior	
2. Notify appropriate District Office 48 hours prior to workover or re-entry.	
3. A copy of the approved notice of intent to drill shall be posted on each drilling rig.	
4. The minimum amount of cathodic surface casing as specified below shall be set by	grouting to the top when the cathodic surface casing is set.
	form CB-1). b. File Certification of Compliance with Kansas Surface Owner Notification
Act (form KSONA-1) with Cathodic Protection Borehole Intent (CB-1) c. File Compl	etion Form (ACO-1) within 60 days from spud date.
d. Submit plugging report (CP-4) within 60 days after final plugging is completed.	
0 1 20 151 4 2 1	
Submitted Electronically	
For KCC Use ONLY	
API # 15	If this permit has expired or will not be drilled, check a box below, sign, date and return
Conductor pipe requiredfeet	to the address below.
Minimum Cathodic Surface Casing Required:feet	Downit Evnisod Matt Not Doith of
	Permit Expired Well Not Drilled
Approved by:	
This authorization expires:	
(This authorization void if drilling not started within 12 months of approval date.)	
	Date Signature of Operator or Agent
Spud date: Agent:	

C	٦.	~ 7	r

1	3	72	n	5	N
	v		v	v	v

238 stward co. 3390' FEL

235 ft.

1980' FSL

For KCC Use ONLY	
API # 15	-

Operator: \_

#### IN ALL CASES, PLEASE FULLY COMPLETE THIS SIDE OF THE FORM.

In all cases, please fully complete this side of the form. Include items 1 through 3 at the bottom of this page.

Location of Well: County: \_

:y Name:									feet f	rom N	/ <u> </u>	Line of Secti
ole Number:									feet f	rom E	/ 🔲 w ı	Line of Secti
						Sec		Twp		R		W
						000		тир. —	O.			
						ls S	ection:	Regular	or Ir	regular		
						13 0	cotion.	_ rtegulai	0111	regulai		
						If S	action is Irra	egular lo	cate well f	rom nearest	t corner he	nundary
								_				Juliuui y.
						Sec	tion corner u	usea:	NE NE	W SE	SW	
						SI AT						
						PLAT						
Show loca	ation of the	a Cathodic R	Rorehole	Show foots	ae to the	nearest la	ase or unit h	houndary	line Show	the predicted	d locations	of
					-			-				
lease roa	ds, tank b	atteries, pipe	elines and	d electrical li	nes, as re	equired by	the Kansas	s Surface	Owner Not	ice Act (Hous	se Bill 2032	2).
				Vau mau	, attach a	00000040	nlat if daaira	d				
				You may	allacri a	separate	plat if desire	ea.				
	:	: :		:								
		: :			:							
	:	: :		:	:	:				<b>LEGEND</b>		
		: :		:	:							
•••••	• • • • • • • • • • • • • • • • • • • •		· · · · · · · · · · · · · · · ·	• • • • • • • • • • • • • • • • • • • •		• • • • • • • • • • • • • • • • • • • •			0	Well Locat	ion	
	:	: :		:	:	:			O	vveii Locat	1011	
		: :		:	:					Tank Batte	rv Locatio	on
	:	:		:	:						-	
				•••••						Pipeline Lo	ocation	
										Electric Lir	a Locatio	n
					:							
	:	:		:	:	:				Lease Roa	ad Locatio	n
	:	: :		:	:	:						
•••••			· · · · · · · · · · ·	• • • • • • • • •								
	:	: :		:	•	:						
				:	:							
		: :	ļ	:	:	;			XAMPLE	:	:	
			1	7 :				-	ANVIPLE	:	:	
	•		'	' — ·					:	:	:	
					:				:	:	:	
1		•		:	•	•		1				1

#### 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 section's south / north and east / west; line.

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

3. The predicted locations of lease roads, tank batteries, pipelines, and electrical lines.



Kansas Corporation Commission 1372
Oil & Gas Conservation Division

Form CDP-1 July 2014 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)	Pit is:  Proposed Existing  If Existing, date constructed:  Pit capacity:		SecTwpR East WestFeet from North / South Line of SectionFeet from East / West Line of SectionFourty			
Is the pit located in a Sensitive Ground Water A	Area? Yes	No (bbls)	Chloride concentration: 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 (fe	et)	Width (feet) N/A: Steel Pits			
Depth fro	om ground level to dee	epest point:	(feet) No Pit			
material, thickness and installation procedure.		liner integrity, ir	ncluding any special monitoring.			
Distance to nearest water well within one-mile of pit:		Depth to shallo Source of infor	owest fresh water feet. mation:			
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 material utilized in drilling/workover:				
Number of producing wells on lease:		Number of working 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 be closed within 365 days of spud date.				
Submitted Electronically						
	KCC	OFFICE USE O				
Date Received: Permit Num	ber:	Perm	Liner Steel Pit RFAC RFAS  it Date: Lease Inspection: Yes No			



1372050

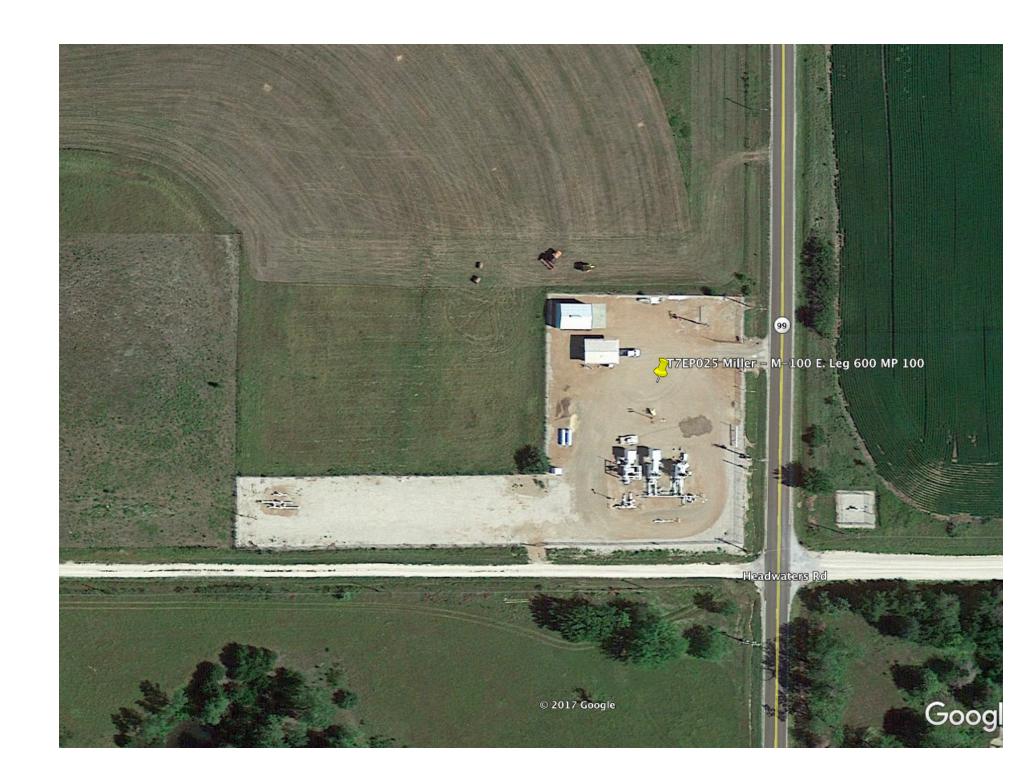
Form KSONA-1
July 2014
Form Must Be Typed
Form must be Signed
All blanks must be Filled

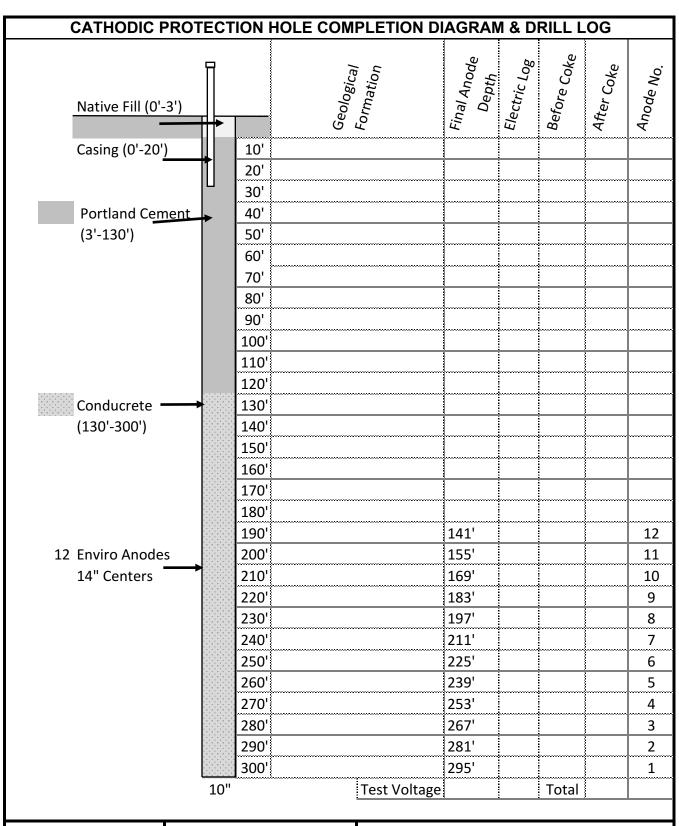
# CERTIFICATION OF COMPLIANCE WITH THE KANSAS SURFACE OWNER NOTIFICATION ACT

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:	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:	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.						
Address 2:							
City:							
the KCC with a plat showing the predicted locations of lease roads, tan 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 I CP-1 that I am filing in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax, a I have not provided this information to the surface owner(s). I a KCC will be required to send this information to the surface or	acknowledge that, because I have not provided this information, the wner(s). To mitigate the additional cost of the KCC performing this s of the surface owner by filling out the top section of this form and						
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-	g fee with this form. If the fee is not received with this form, the KSONA-1 -1 will be returned.						
Submitted Electronically							
I and the second							







M-100

Wabuensee County, Kansas

INSTALLED FOR: Enterprise

RECTIFIER ID: M-100

GPS LOC: 38.82690048, -96.0951156

**INSTALL DATE:** 

JOB NO: T7EP025
INSPECTOR: Byron Miller

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



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

Sam Brownback, Governor

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

According to the drilling pit application, no earthen pits will be used at this location. Steel pits will be used. Please inform the Commission in writing as to which disposal well you utilized to dispose of the contents in the steel pits and the amount of fluid that was disposed. Please file form CDP-5, Exploration and Production Waste Transfer, within 30 days of fluid removal.

Should a haul-off pit be necessary please file form CDP-1, Application for Surface Pit, This location will have to be inspected prior to approval of the haul-off pit application.

A copy of this letter should be posted in the doghouse along with the approved Intent to Drill.