

\_\_ Agent: \_

## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1372344

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

## NOTICE OF INTENT TO DRILL

· dav vear	Spot Description:
month day year	Sec Twp S. R 🔲 E 🔲 W
PERATOR: License#	feet from N / S Line of Section
ame:	feet from E / W Line of Sectio
ddress 1:	Is SECTION: Regular Irregular?
ddress 2:	(Note: Locate well on the Section Plat on reverse side)
ty:	County:
ontact Person:	Lease Name: Well #:
none:	Field Name:
ONTRACTOR: License#	Is this a Prorated / Spaced Field?
ame:	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 MS
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
III OVVVO. Old well information as follows.	Length of Surface Pipe Planned to be set:
Operator:	Length of Conductor Pipe (if any):
Well Name:	Projected Total Depth:
Original Completion Date: Original Total Depth:	Formation at Total Depth:
	Water Source for Drilling Operations:
Directional, Deviated or Horizontal wellbore?	Well Farm Pond Other:
Yes, true vertical depth:	DWR Permit #:
tottom Hole Location:	(Note: Apply for Permit with DWR )
CC DKT #:	Will Cores be taken?
	If Yes, proposed zone:
AF	FIDAVIT
he undersigned hereby affirms that the drilling, completion and eventual plu	agging of this well will comply with K.S.A. 55 et. seq.
	agging of this well will comply with K.S.A. 55 et. seq.
t is agreed that the following minimum requirements will be met:	agging of this well will comply with K.S.A. 55 et. seq.
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Well will not be drilled or Permit Expired Date: \_

Signature of Operator or Agent:

SEWARD CO. 3390' FEL

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:								Well: County:
_ease:								feet from N / S Line of Section
Nell Number:								feet from E / W Line of Section
Field:						_ Se	C	TwpS. R L E L W
Number of Acres att						– ls :	Section:	Regular or Irregular
								s Irregular, locate well from nearest corner boundary. ner used: NE NW SE SW
				d electrica	al lines, as	required b		ndary line. Show the predicted locations of nsas Surface Owner Notice Act (House Bill 2032). esired.
	: :	:	: : :			:	:	LEGEND
					] ©——			1942 ft. O Well Location Tank Battery Location Pipeline Location Electric Line Location Lease Road Location
	: : : :	: : : : : :	3		: : : : :	: : : :		EXAMPLE
	·			•••••				
				<b></b>	: : :			

 ${\it NOTE: In all \ cases \ locate \ the \ spot \ of \ the \ proposed \ drilling \ locaton.}$ 

#### 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.



# 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	Proposed	Existing	SecTwp R		
Settling Pit Drilling Pit	If Existing, date constructed:		Feet from North / South Line of Section		
Workover Pit Haul-Off Pit (If WP Supply API No. or Year Drilled)	Pit capacity:		Feet from East / West Line of Section		
	(bbls)		County		
Is the pit located in a Sensitive Ground Water Area? Yes No			Chloride concentration: mg/l  (For Emergency Pits and Settling Pits only)		
Is the bottom below ground level?  Yes No	Artificial Liner?	0	How is the pit lined if a plastic liner is not used?		
Pit dimensions (all but working pits):	Length (feet	t)	Width (feet) N/A: Steel Pits		
Depth fro	om ground level to deep	pest point:	(feet) No Pit		
If the pit is lined give a brief description of the li material, thickness and installation procedure.			dures for periodic maintenance and determining cluding any special monitoring.		
Distance to nearest water well within one-mile of	of pit:	Depth to shallow Source of inform	west fresh water feet.		
feet Depth of water well	feet	measured	well owner electric log KDWR		
Emergency, Settling and Burn Pits ONLY:		Drilling, Workover 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 p	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 O	OFFICE USE OF	NLY  Liner Steel Pit RFAC RFAS		
Date Received: Permit Numl	ber:	Permi	t Date: Lease Inspection: Yes No		



## Kansas Corporation Commission Oil & Gas Conservation Division

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	Cathodic Protection Borehole Intent)				
OPERATOR: License #	Well Location:				
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 o 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				
Address 2:	county, and in the real estate property tax records of the county treasurer.				
City:					
the KCC with a plat showing the predicted locations of lease roads, tank are preliminary non-binding estimates. The locations may be entered or 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 locations of lease roads, tank are preliminary non-binding estimates. The locations may be entered or select one of the following:	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.  cct (House Bill 2032), I have provided the following to the surface ocated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form 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 ow	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-1	fee with this form. If the fee is not received with this form, the KSONA-1 will be returned.				
Submitted Electronically					



