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

Kansas Corporation Commission 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

Expected Spud Date:	Spot Description:
DPERATOR: License#	Sec Twp S. R E V
lame:	feet from E / W Line of Section
ddress 1:	Is SECTION: Regular Irregular?
ddress 2:	(Note: Locate well on the Section Plat on reverse side)
ity: State: Zip: +	County:
ontact Person:hone:	Lease Name: Well #:
TIONS	Field Name:
CONTRACTOR: License#	Is this a Prorated / Spaced Field?
lame:	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: Public water supply well within one mile: Yes N Yes N
Disposal Wildcat Cable	Public water supply well within one mile: Yes Yes Yes
Seismic ; # of Holes Other	Depth to bottom of usable water:
Other:	Surface Pipe by Alternate: I III
If OWWO: old well information as follows:	Length of Surface Pipe Planned to be set:
0	Length of Conductor Pipe (if any):
Operator:	Projected Total Depth:
Original Completion Date: Original Total Depth:	Formation at Total Depth:
	Water Source for Drilling Operations:
irectional, Deviated or Horizontal wellbore? Yes No	Well Farm Pond Other:
Yes, true vertical depth:	DWR Permit #:
Bottom Hole Location:	(Note: Apply for Permit with DWR)
	MCII O - 4 - 0
OO DICT π.	
(CC DKT #:	If Yes, proposed zone:
AF	If Yes, proposed zone:
AF The undersigned hereby affirms that the drilling, completion and eventual pl	If Yes, proposed zone:
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Well will not be drilled or Permit Expired Date: _

Signature of Operator or Agent:

Side Two

For KCC Use ONLY	
API # 15	

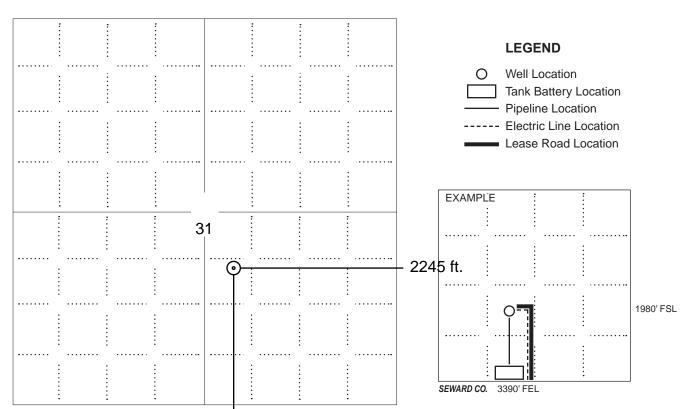
IN ALL CASES PLOT THE INTENDED WELL ON THE PLAT BELOW

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
	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.

1870 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	Proposed	Existing	SecTwp R	
Settling Pit Drilling Pit	If Existing, date cor	nstructed:	Feet from North / South Line of Section	
Workover Pit Haul-Off Pit (If WP Supply API No. or Year Drilled)	Pit capacity:	(111)	Feet from East / West Line of Section	
		(bbls)	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? Yes No	Artificial Liner?	lo	How is the pit lined if a plastic liner is not used?	
Pit dimensions (all but working pits):	Length (fee	et)	Width (feet) N/A: Steel Pits	
Depth fro	om ground level to dee	pest point:	(feet) No Pit	
If the pit is lined give a brief description of the li material, thickness and installation procedure.	ilei		dures for periodic maintenance and determining cluding any special monitoring.	
Distance to nearest water well within one-mile of pit:		Depth to shallow Source of inforr	west fresh water feet.	
feet Depth of water wellfeet		measured	well owner electric log KDWR	
Emergency, Settling and Burn Pits ONLY:		Drilling, Worko	ver 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 p	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				
KCC OFFICE USE ONLY				
Date Received: Permit Numl	ber:	Permi	Liner Steel Pit RFAC RFAS 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

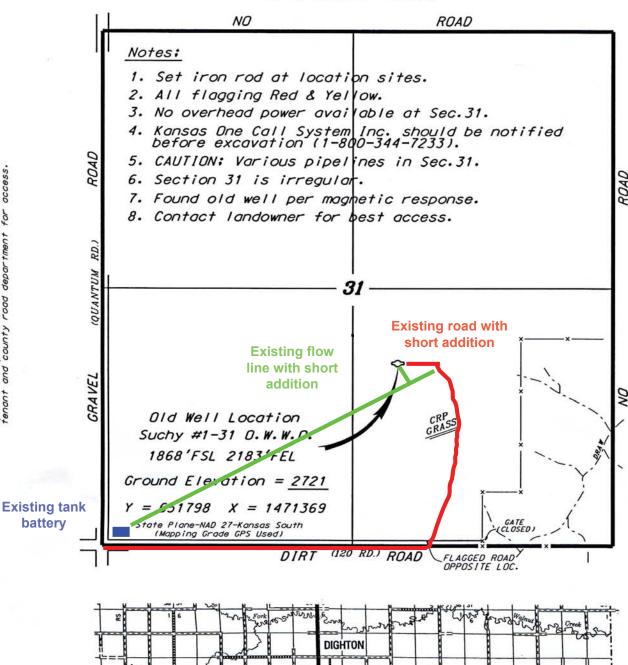
CERTIFICATION OF COMPLIANCE WITH THE KANSAS SURFACE OWNER NOTIFICATION ACT

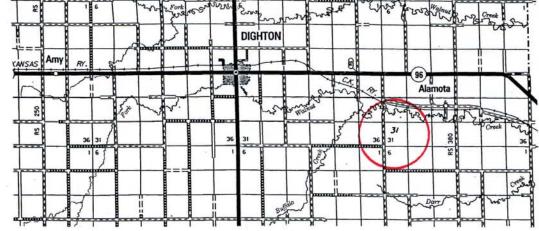
This form must be submitted with all Forms C-1 (Notice of Intent to Drill); CB-1 (Cathodic Protection Borehole Intent); T-1 (Request for Change of Operator Transfer of Injection or Surface Pit Permit); and CP-1 (Well Plugging Application).

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) T-1 (Transfer) CP-1 (Plugging Application)	
OPERATOR: License #	Well Location:	
Name:	SecTwpS. R East	
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	
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 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: State: Zip:+		
the KCC with a plat showing the predicted locations of lease roads, tank	dic Protection Borehole Intent), you must supply the surface owners and batteries, pipelines, and electrical lines. The locations shown on the plat at the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.	
owner(s) of the land upon which the subject well is or will be lo	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 ceing 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 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 CCC, 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. TROST/SUCHY LEASE SE. 1/4. SECTION 31. T18S. R27W LANE COUNTY, KANSAS





December 12, 2013

pproximate section lines were determined using the normal standard of core of oilfield surveyors practicing in the state of Kansas. The section corners, which establish the precise section lines, were not necessarily located, and the exact location of the drillsite location in the section is not quaranteed. Therefore, the operator securing this service and occepting this plat and all other arties relying thereon agree to half Central Kansas Diffield Services, Inc., its officers and implayees harmless from all lasses, costs and expenses and said entities released from any liability from incidental or consequential damages.

STATE OF KANSAS WELL PLUGGING RECORD API NUMBER 15-101-21758 0000 STATE CORPORATION COMMISSION K.A.R.-82-3-117 200 Colorado Derby Building Wichita, Kansas 67202 LEASE NAME Suchy WELL NUMBER 1-31 TYPE OR PRINT NOTICE: Fill out completely and return to Cons. Div. 1870 Ft. from S Section Line office within 30 days. 2245 Ft. from E Section Line LEASE OPERATOR Dunne Oil Company SEC. 31 TWP. 18 RGE. 27 (EXXXX(W) ADDRESS 100 S. Main - Suite 410 Wichita, Kansas 67202 COUNTY Lane County, Kansas PHONE # (316) 267-3448 OPERATORS LICENSE NO. 4197 Date Well Completed 01-27-98 Plugging Commenced 01-27-98 Character of Well D&A (Oil, Gas, D&A, SWD, input, Water Supply Well) Plugging Completed <u>01-27-98</u> The plugging proposal was approved on January 23, 1998 (date) (KCC District Agent's Name). Richard Lacey Is ACO-1 filed?______If not, is well log attached?_____ Producing Formation ______ Depth to Top_____ Bottom_____T.D. 4650* Show depth and thickness of all water, oil and gas formations. OIL, GAS OR WATER RECORDS Formation Content From To Size Put in Pulled out Describe in detail the manner in which the well was plugged, indicating where the mud fluid w placed and the method or methods used in introducing it into the hole. If cement or other pl were used, state the character of same and depth placed, from feet to feet each se 1st Plug: 2100' w/50 sacks cement thru drill pipe 2nd Plug: 1300' w/80 3rd Plug: 600' w/40 4th Pluge 290' w/40 5th Plug: 40' w/10 Rathole w/15 Name of Plugging Contractor <u>Duke Drilling Co., Inc.</u> License No. 5929 Address P.O. Box-823 ___ Great Bend, Kansas __67530 ____ NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Dunne Oil Company STATE OF _____ COUNTY OF (Employee of Operator) or (Operator) above-described well, being first duly sworn on oath, says: That have knowledge of the fact statements, and matters herein contained and the log of the above-described well as filed th the same are true and correct, so help me God. (Signature) XIII ANNE M. KEWLEY (Address) NOTARY PUBLIC STATE OF KANEAS LEET AND SWORN TO before me this ________ My Appt. Exp. 1013/3/2/22 mno III

USE ONLY ONE SIDE OF EACH FORM

Form CP-4 Revised 05-88