## KOLAR Document ID: 1406800

For	ксс	Use:
-----	-----	------

Effective	Dat
-----------	-----

SGA?	Yes	N

## 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

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

FOITH ASONA-I, Cerunication	n or compliance with the Ka	isas Suriace Owner Nound	Salion Act, WOST be Subini	llea with this form.

Expected Spud Date:	Spot Description:	
OPERATOR: License#		E W 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 s	ide)
City: State: Zip: +	County:	
Contact Person:	Lease Name: We	
Phone:	Field Name:	
CONTRACTOR: License#	Is this a Prorated / Spaced Field?	Yes No
Name:	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 MSL
Gas Storage Pool Ext. Air Rotary	Water well within one-quarter mile:	Yes No
Disposal Wildcat Cable	Public water supply well within one mile:	Yes No
Seismic ; # of Holes Other	Depth to bottom of fresh water:	
Other:	Depth to bottom of usable water:	
	Surface Pipe by Alternate:	
If OWWO: 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:	
If Yes, true vertical depth:	DWR Permit #:	
Bottom Hole Location:	( <b>Note:</b> Apply for Permit with DWR )	
KCC DKT #:	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 E	Electronically
-------------	----------------

For KCC Use ONLY	
API # 15	
Conductor pipe required	feet
Minimum surface pipe required	feet per ALT.
Approved by:	
This authorization expires:	
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.

ш

\_ Well will not be drilled or Permit Expired Date: \_ Signature of Operator or Agent: For KCC Use ONLY

API # 15 -\_\_\_\_

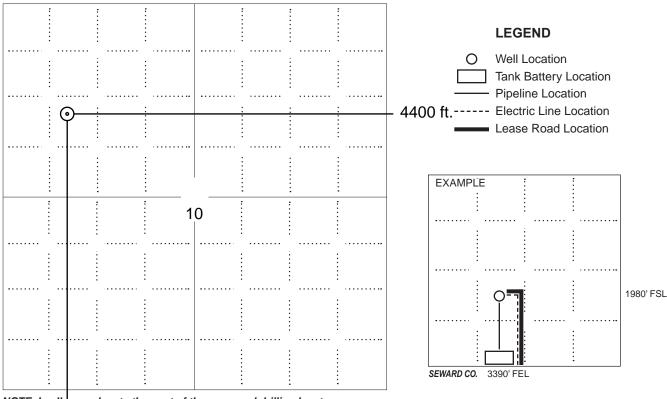
## IN ALL CASES PLOT THE INTENDED WELL ON THE PLAT BELOW

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 E 📃 W
Number of Acres attributable to well: QTR/QTR/QTR/QTR of acreage:	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.

### 3770 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.

Side Two

## KOLAR Document ID: 1406800

## 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	SecTwpR East West	
Settling Pit Drilling Pit	If Existing, date co	nstructed:	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?	Artificial Liner?	1-	How is the pit lined if a plastic liner is not used?	
Yes No		No		
Pit dimensions (all but working pits):				
	om ground level to dee			
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: Depth to shall Source of infor		west fresh water feet. nation:		
feet Depth of water wellfeet measured		measured	well owner electric log KDWR	
Emergency, Settling and Burn Pits ONLY: Drilling,		Drilling, Worko	, Workover and Haul-Off Pits ONLY:	
Producing Formation:		Type of materia	l utilized in drilling/workover:	
Number of producing wells on lease: Number of		Number of wor	xing pits to be utilized:	
Barrels of fluid produced daily: Aband		Abandonment	procedure:	
Does the slope from the tank battery allow all spilled fluids to   flow into the pit? Yes   No Drill pits must		Drill pits must b	e closed within 365 days of spud date.	
Submitted Electronically				
KCC OFFICE USE ONLY   Liner Steel Pit RFAC				
Date Received: Permit Nun	ber:	Permi	t Date: Lease Inspection: Yes No	

## KOLAR Document ID: 1406800

## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

# CERTIFICATION OF COMPLIANCE WITH THE KANSAS SURFACE OWNER NOTIFICATION ACT

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

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:		
Address 1:	County:	
Address 2:	Lease Name: Well #:	
City:      State:	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:	
Contact Person: Fax: ( )		
Email Address:		
Surface Owner Information:		
Name:	sheet listing all of the information to the left for each surface owner. Surface	
Address 1:		
Address 2:	county, and in the real estate property tax records of the county treasurer.	
City: State: Zip:+		

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.

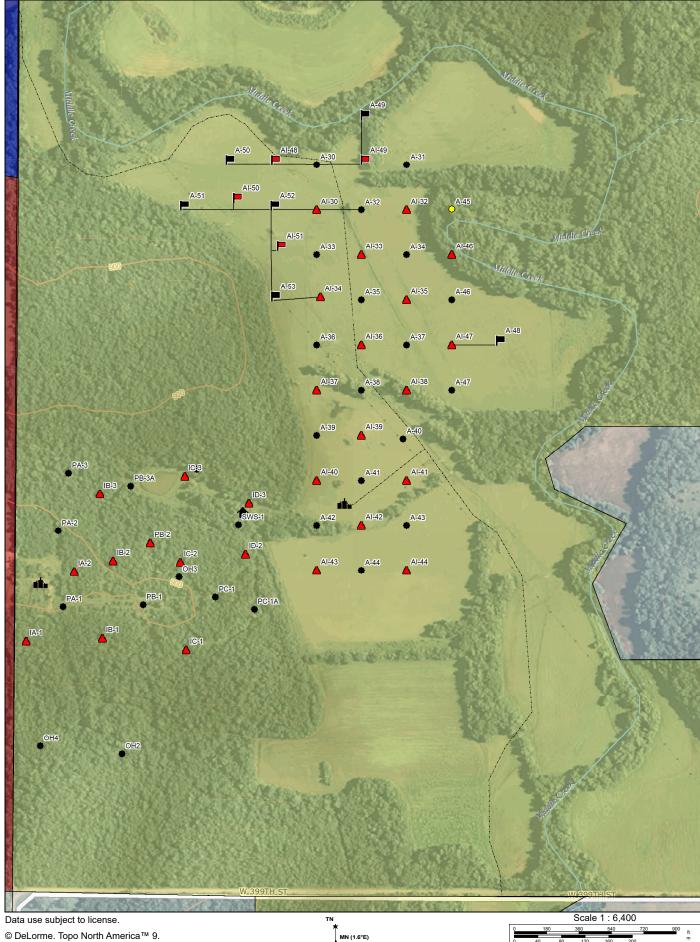
#### Select one of the following:

- 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.

### Submitted Electronically

DELORME



## STATE OF KANSAS

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



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

GOVERNOR JEFF COLYER, M.D. Shari Feist Albrecht, Chair | Jay Scott Emler, Commissioner | Dwight D. Keen, Commissioner

April 24, 2018

Phil Frick Oak Ridge LLC 4595 HIGHWAY K-33 PO BOX 128 WELLSVILLE, KS 66092

Re: Drilling Pit Application Middaugh A-51 NW/4 Sec.10-19S-24E Miami County, Kansas

Dear Phil Frick:

District staff has inspected the above referenced location and has determined that the reserve pit shall be 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 as soon as practical 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 (620) 902-6450 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 (620) 902-6450.