or KCC Use:
Effective Date:
District #
CA2 Vos 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

	Const Deposite tions
Expected Spud Date:	Spot Description:         Sec.         Twp.         S. R E W
	Sec Twp S. R E W
DPERATOR: License#	feet from E / W Line of Section
ddraes 1:	Is SECTION: Regular Irregular?
ddress 1:ddress 2:	
State: State: Zip: +	(Note: Locate well on the Section Plat on reverse side)
Contact Person:	County: Well #:
hone:	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):
	Ground Surface Elevation:feet MSI
Oil Enh Rec Infield Mud Rotary	Water well within one-quarter mile:
Gas Storage Pool Ext. Air Rotary Disposal Wildcat Cable	Public water supply well within one mile:
Disposal Wildcat Cable  Seismic : # of Holes Other	Depth to bottom of fresh water:
Other:	Depth to bottom of usable water:
	Surface Pipe by Alternate: II
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:
irectional, Deviated or Horizontal wellbore?	Well Farm Pond Other:
Yes, true vertical depth:	DWR Permit #:
ottom Hole Location:	( <b>Note:</b> 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	ugging of this well will comply with K.S.A. 55 et. seq.
is agreed that the following minimum requirements will be met:	
Notify the appropriate district office <i>prior</i> to spudding of well;	
<ol> <li>A copy of the approved notice of intent to drill <i>shall be</i> posted on each</li> </ol>	n 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 th	
	, , , , , , , , , , , , , , , , , , , ,
4. If the well is dry hole, an agreement between the operator and the dis	
5. The appropriate district office will be notified before well is either plugg	
<ul><li>5. The appropriate district office will be notified before well is either plugge</li><li>6. If an ALTERNATE II COMPLETION, production pipe shall be cemented</li></ul>	d from below any usable water to surface within 120 DAYS of spud date.
<ol> <li>The appropriate district office will be notified before well is either plugg</li> <li>If an ALTERNATE II COMPLETION, production pipe shall be cemented or pursuant to Appendix "B" - Eastern Kansas surface casing order #</li> </ol>	
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5. The appropriate district office will be notified before well is either plugg 6. If an ALTERNATE II COMPLETION, production pipe shall be cemente Or pursuant to Appendix "B" - Eastern Kansas surface casing order # must be completed within 30 days of the spud date or the well shall be  Ubmitted Electronically  For KCC Use ONLY  API # 15	d from below any usable water to surface within 120 DAYS of spud date.  133,891-C, which applies to the KCC District 3 area, alternate II cementing a plugged. In all cases, NOTIFY district office prior to any cementing.  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);

Signature of Operator or Agent:

Side Two

For KCC Use ONLY	
API # 15	-

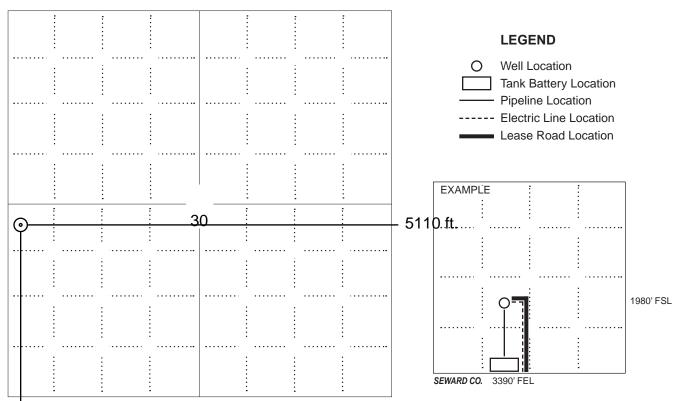
#### IN ALL CASES PLOT THE INTENDED WELL ON THE PLAT BELOW

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 🗌 E 🔲 W
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.

## 2350 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 East West
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:	(111)	Feet from East / West Line of Section
	-	(bbls)	County
Is the pit located in a Sensitive Ground Water A	rea? Yes I	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.
		Depth to shallor Source of inforr	west fresh water feet.
feet Depth of water well	feet	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 working pits to be utilized:	
Barrels of fluid produced daily:		Abandonment p	procedure:
Does the slope from the tank battery allow all spilled fluids to flow into the pit?		Drill pits must b	e closed within 365 days of spud date.
	-		
Submitted Electronically			
KCC OFFICE USE ONLY  Liner Steel Pit RFAC RFAS			
Date Received: Permit Numl	ber:	Permi	

## 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	athodic 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 #:  If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:		
City: State: Zip:+			
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 on Select one of the following:  I certify that, pursuant to the Kansas Surface Owner Notice Acowner(s) of the land upon which the subject well is or will be located CP-1 that I am filing in connection with this form; 2) if the form beform; and 3) my operator name, address, phone number, fax, and I have not provided this information to the surface owner(s). I ack KCC will be required to send this information to the surface owner.	cknowledge that, because I have not provided this information, the ner(s). To mitigate the additional cost of the KCC performing this		
that I am being charged a \$30.00 handling fee, payable to the Ko	fee with this form. If the fee is not received with this form, the KSONA-1		
Submitted Electronically			

