| For 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

| Expected Spud Date:   | Spot Description:  |
|---|--|
| OPERATOR: License#  | Sec Twp S. R E feet from N / S Line of Section N / N / S Line of Section N / N   |
| lame:   | feet from E / W Line of Section  |
| ddress 1:   | Is SECTION: Regular Irregular?   |
| ddress 2: + State: Zip: +   | (Note: Locate well on the Section Plat on reverse side)  |
| contact Person:   | County:  |
| hone:   | Lease Name: Well #:  |
| ONTRACTOR: License#   | Field Name:  Is this a Prorated / Spaced Field?  Yes N   |
| ame:  | Is this a Prorated / Spaced Field?  Target Formation(s):   |
|   | Nearest Lease or unit boundary line (in footage):  |
| Well Drilled For: Well Class: Type Equipment:   | Ground Surface Elevation:  |
| 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: I III   |
| 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:  | (Note: Apply for Permit with DWR )   |
| OC DR1 #.   | Will Cores be taken?   |
|   | If Yes, proposed zone:   |
|   |  |
| AF  | FIDAVIT  |
|   |  |
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Signature of Operator or Agent:

Side Two

| For KCC Use ONLY |   |
|------------------|---|
| API # 15         | _ |

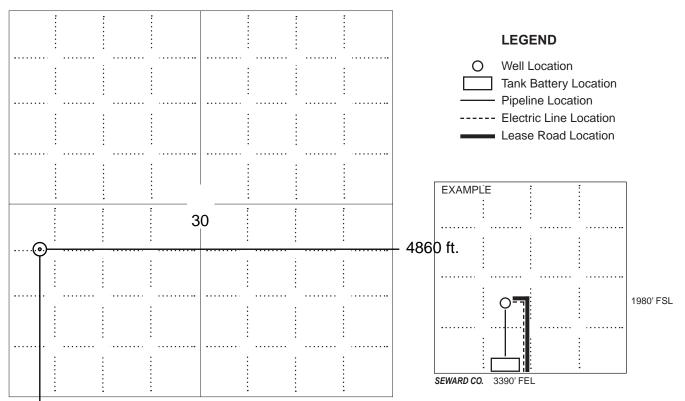
#### IN ALL CASES PLOT THE INTENDED WELL ON THE PLAT BELOW

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.

#### 2018 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  If Existing, date constructed: |                                     | SecTwp R  |  |
| Settling Pit Drilling Pit  |   |                                     | Feet from North / South Line of Section                                   |  |
| Workover Pit Haul-Off Pit  (If WP Supply API No. or Year Drilled)          | Pit capacity:                                     | (bbls)                              | Feet from East / West Line of Section                                     |  |
| 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?  | 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  | m ground level to dee                             | pest point:                         | (feet) No Pit   |  |
|  |   | • ,                                 | cluding any special monitoring.   |  |
| Distance to nearest water well within one-mile of                          | of pit:   | Depth to shallo<br>Source of inform | west fresh water feet.<br>nation:   |  |
| feet Depth of water well   | feet  | measured                            | well owner electric log KDWR  |  |
| Emergency, Settling and Burn Pits ONLY:                                    |   | Drilling, Work                      | ver and Haul-Off Pits ONLY:   |  |
| Producing Formation:   |   | Type of materia                     | l utilized in drilling/workover:  |  |
| Number of producing wells on lease: Number o                               |   | Number of worl                      | king pits to be utilized:   |  |
| Barrels of fluid produced daily: Aban                                      |   | 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  Liner Steel Pit RFAC RFAS                             |   |                                     |   |  |
| Date Received: Permit Numl   | ber:  | Permi                               | t Date: Lease Inspection:   |  |

#### Kansas Corporation Commission Oil & Gas Conservation Division

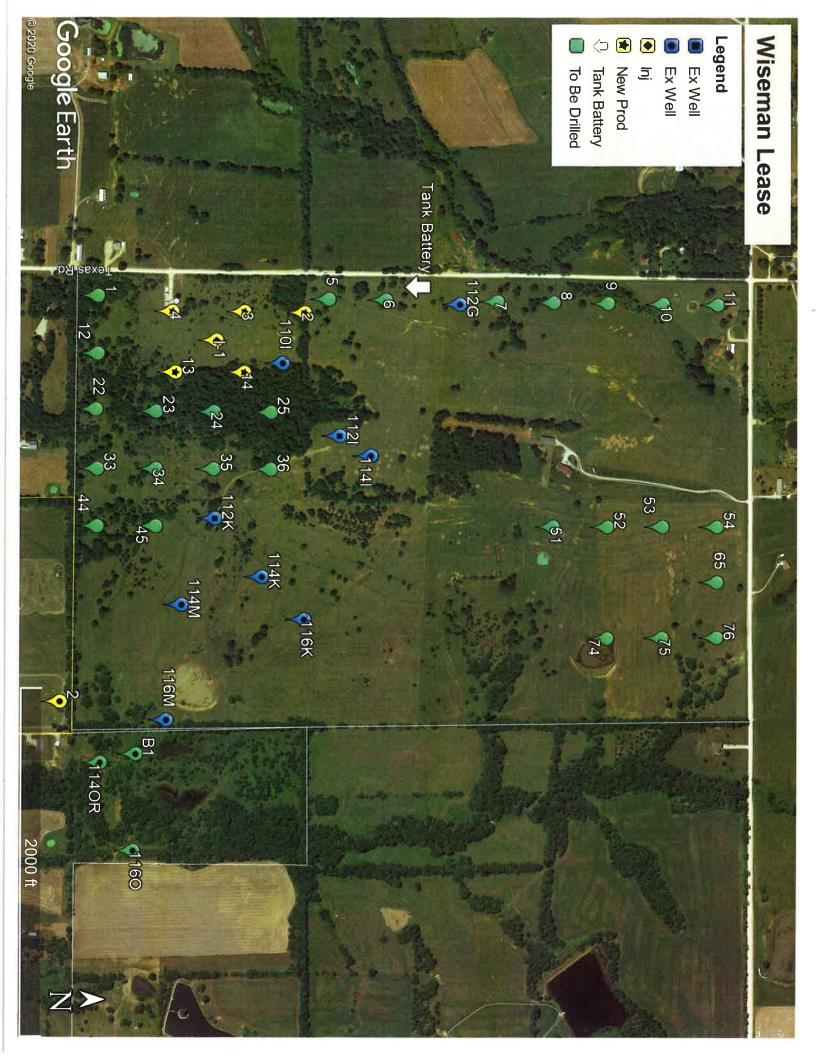
Form KSONA-1
January 2014
Form Must Be Typed
Form must be Signed
All blanks must be Filled

# 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. Surfa owner information can be found in the records of the register of deeds for t |  |
| 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   |   |  |



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



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

Laura Kelly, Governor

Andrew J. French, Chairman Dwight D. Keen, Commissioner Susan K. Duffy, Commissioner

## NOTICE TO OPERATORS FILING INTENT TO DRILL FOR DISPOSAL OR ENHANCED RECOVERY INJECTION WELLS, (CLASS II INJECTION WELL)

The attached approved Notice of Intent to Drill indicates the proposed well is to be used for injection. An approved "Intent to Drill" does not approve injection authority as a Class II Injection Well in Kansas.

Before any well is used for injection purposes, the operator must file an application for injection authority in accordance with K.A.R. 82-3-401 and provide notice in accordance with K.A.R. 82-3-402. The Conservation Division must issue a written permit granting the application before commencement of injection.

The Conservation Division requirements and restrictions associated with Class II Injection are identified in K.A.R. 82-3-400 et seq of our regulations. Associated regulations governing drilling, completion and injection applications may be found in K.A.R. 82-3-135, Table I, Table II, in the Cedar Hills Sandstone Moratorium, (Docket #156,397-C), and the Eastern Kansas Surface Casing Order, (Docket #133,891-C).

If you have questions regarding the approval of injection authority, an injection application may be filed as a "Design Approval" before actual drilling and completion of the well occurs. If you have any questions or concerns regarding Class II injection wells or regulations, call the Underground Injection Control Department at 316-337-6200.

Failure to obtain commission approval before beginning injection is punishable by a penalty, shut-in of the well or both.