KOLAR Document ID: 1568427

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

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form CB-1 Oct 2016 Form must be Typed Form must be Signed All blanks must be Filled

CATHODIC PROTECTION BOREHOLE INTENT

Must be approved by the KCC sixty (60) days prior to commencing well.

	Spot Description:
Expected Spud Date: month day year	
	(0/0/0/0)
OPERATOR: License#	feet from N / S Line of Section
Name:	feet from E / W Line of Section
Address 1:	Is SECTION: Regular Irregular?
Address 2:	(Check directions from nearest outside corner boundries)
City:	County:
Contact Person:	Facility Name:
Phone:	Borehole Number:
CONTRACTOR: License#	Ground Surface Elevation: MSI
Name:	Cathodic Borehole Total Depth: feet
Type Drilling Equipment:	Depth to Bedrock: fee
☐ Air Rotary ☐ Other	Water Information
Construction Features	Aquifer Penetration: None Single Multiple
Length of Cathodic Surface (Non-Metallic) Casing	Depth to bottom of fresh water:
Planned to be set: feet	Depth to bottom of usable water:
Length of Conductor pipe (if any): feet	Water well within one-quarter mile: Yes No
Surface casing borehole size: inches	Public water supply well within one mile: Yes No
Cathodic surface casing size: inches	Water Source for Drilling Operations:
Cathodic surface casing centralizers set at depths of:;;	☐ Well ☐ Farm Pond ☐ Stream ☐ Other
;;;;;	Water Well Location:
Cathodic surface casing will terminate at:	DWR Permit #
Above surface Surface Vault Below Surface Vault	Standard Dimension Ratio (SDR) is =
Pitless casing adaptor will be used: Yes No Depth feet	(Cathodic surface csg. O.D. in inches / MWT in inches = SDR)
Anode installation depths are:;; ;; ;;	Annular space between borehole and casing will be grouted with:
	Concrete Neat Cement Bentonite Cement Bentonite Clay
;;;;;	Anode vent pipe will be set at: feet above surface
	Anode conductor (backfill) material TYPE:
	Depth of BASE of Backfill installation material:
AFFIDAVIT	Depth of TOP of Backfill installation material:
he undersigned hereby affirms that the drilling, completion and eventual plugging fithis well will comply with K.S.A. 55-101 et. seq.	Borehole will be Pre-Plugged? Yes No
as agreed mat the following minimum requirements will be met.	
Notify the appropriate District office prior to spudding and again before plugging the and placement is necessary prior to plugging. In all cases, notify District Office prior.	
 Notify the appropriate District office prior to spudding and again before plugging the and placement is necessary prior to plugging. In all cases, notify District Office prior Notify appropriate District Office 48 hours prior to workover or re-entry. 	
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C	ida	Tu	

For KCC Use ONLY	
API # 15	_

IN ALL CASES, PLEASE FULLY COMPLETE THIS SIDE OF THE FORM.

In all cases, please fully complete this side of the form. Include items 1 through 3 at the bottom of this page.

						_ Loc	ation of We	ell: County	/:				
Name:									fee	t from	N /	S Lir	e of Sec
Number:						- —					E /	W Lin	e of Sec
						Sec	D. ————	Twp	S	S. R		E	W
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							ection is li	_		I from n		orner bou	ndary.
						PLAT							
Show loc	ation of the	e Cathodic	Borehole.	Show foo			ease or uni	it boundarv	v line. Sho	w the pr	edicted la	ocations of	,
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			3					_		Well Tank Pipel Elect Leas	Location Battery ine Loca ric Line	Location ation Location	1980'

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.;

SEWARD CO. 3390' FEL

- 2. The distance of the proposed drilling location from the section's south / north and east / west; line.
- 3. The predicted locations of lease roads, tank batteries, pipelines, and electrical lines.

KOLAR Document ID: 1568427

Kansas Corporation Commission Oil & Gas Conservation Division

Form CDP-1 July 2014 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 con	structed:	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 A	rea? Yes N	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 (fee	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.	ilei		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 inforr	west fresh water feet. nation:				
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 s flow into the pit? Yes No	pilled fluids to	Drill pits must be closed within 365 days of spud date.					
Submitted Electronically							
	KCC C	OFFICE USE OI	NLY Liner Steel Pit RFAC RFAS				
Date Received: Permit Num	ber:	Permi	t Date: Lease Inspection: Yes No				

KOLAR Document ID: 1568427

Kansas Corporation Commission Oil & Gas Conservation Division

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

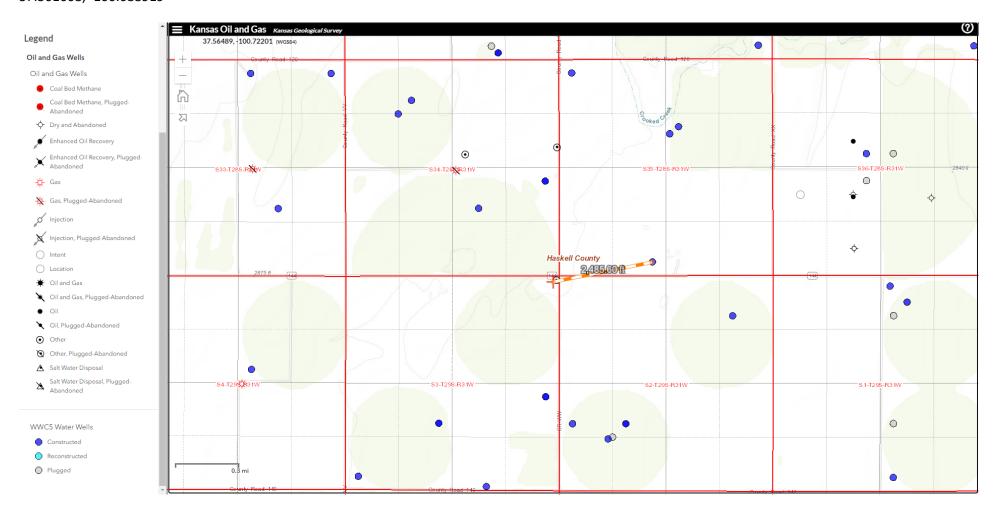
CERTIFICATION OF COMPLIANCE WITH THE KANSAS SURFACE OWNER NOTIFICATION ACT

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 (Ca	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 #:
City: State: Zip:+	If filing a Form T-1 for multiple wells on a lease, enter the legal description of 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: State: Zip:+	
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathod 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:	batteries, pipelines, and electrical lines. The locations shown on the plat
owner(s) of the land upon which the subject well is or will be loc	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 eing filed is a Form C-1 or Form CB-1, the plat(s) required by this id email address.
KCC will be required to send this information to the surface own	knowledge 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 CC, 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	
Submitted Electronically	
Ι	_

KGS-72 Replacement Sanchez Haskell County 37.561668, -100.688919



			TY	PE 3	PAGE 1	OF 1
CLIENT: ONEOK			PROJECT NAME:	Groundbed Install	ED: <u>6/1/2021</u>	
SITE: KGS	-72 Replace	ement Sanchez	LOCATION	: Kansas		
OTHER ID#	ŧ		FACILITY:	G	PS <u>37.561668 -100.688</u>	919
COMPANY :	3-B Drilling	g	RIG:		BOREHOLE: 10 inch	
LOGGED BY:			DRILLING METHOD:	Wet Rotary or Dry	FLUIC Water if w	et rotary
		TYPE	INTERVAL	MATERIAL	JOINT LENGTH	DIAMETER
CASING:		SDR 21	0-20'	PVC		10"
SCREEN:						
GROUT:						
SEAL:						

FILTER PACK:

Initial Depth to Water: Static Depth to Water: Comments

Not to scale

DEEP GROUNDBED WELL	DЕРТН (FT.)		
CONSTRUCTION		DESCRIPTION/COMMENTS	
20"	3	S O I L	<u> </u>
Casing	<u> </u>	CEMENTED CASING	
	T 1 1		
	† †		
	F 1 1	PURE GOLD	
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