## **CORRECTION #1**

KOLAR Document ID: 1584893

For KCC Use:	KANSAS CORPORATION COMMISSION
Effective Date:	OIL & GAS CONSERVATION DIVISION
District #	Ole a One Concert willow Biviolott

Form CB-1 Oct 2016 Form must be Typed Form must be Signed

#### **CATHODIC PROTECTION BOREHOLE INTENT**

	ON BOREHOLE INTENT  All blanks must be Filled
	(60) days prior to commencing well. urface Owner Notification Act, MUST be submitted with this form.
Expected Spud Date:	Spot Description:
month day year	
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: MSL
Name:	Cathodic Borehole Total Depth: feet
Type Drilling Equipment:	Depth to Bedrock: feet
☐ 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 Depthfeet	(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 vent pipe will be set at: leet above surface Anode conductor (backfill) material TYPE:
	Depth of BASE of Backfill installation material:
4 <b></b> 15 41/1-	Depth of TOP of Backfill installation material:
AFFIDAVIT	Borehole will be Pre-Plugged? Yes No
The undersigned hereby affirms that the drilling, completion and eventual plugging of this well will comply with K.S.A. 55-101 et. seq.	
t is agreed that the following minimum requirements will be met:	
Notify the appropriate District office prior to spudding and again before plugging the value and placement is necessary prior to plugging. In all cases, notify District Office prior	
2. Notify appropriate District Office 48 hours prior to workover or re-entry.	to any grouting.
3. A copy of the approved notice of intent to drill shall be posted on each drilling rig.	
<ol> <li>A copy of the approved notice of intent to drift shall be posted on each drifting rig.</li> <li>The minimum amount of cathodic surface casing as specified below shall be set by g</li> </ol>	routing to the ton when the cathodic surface casing is set
	rm CB-1). b. File Certification of Compliance with Kansas Surface Owner Notification
Act (form KSONA-1) with Cathodic Protection Borehole Intent (CB-1) c. File Comple	,
d. Submit plugging report (CP-4) within 60 days after final plugging is completed.	
Submitted Electronically	
For KCC Use ONLY	
API # 15	If this permit has expired or will not be drilled, check a box below, sign, date and return
Conductor pipe requiredfeet	to the address below.
Minimum Cathodic Surface Casing Required:feet	Permit Expired Well Not Drilled
Approved by:	
This authorization expires:	
(This authorization void if drilling not started within 12 months of approval date.)	
	Date Signature of Operator or Agent
Spud date: Agent:	



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.

							ation of We	ell: County:
ame:								feet from N / S Line of Sect
Number:								feet from E / W Line of Sect
						Sec	)	Twp S. R
						ls S	Section:	Regular or Irregular
						If S	ection is l	rregular, locate well from nearest corner boundary.
							ction corne	
						000	Alon conto	1 dodd.
						DLAT		
						PLAT		
Show loca	ation of the	Cathodic	Borehole.	Show foo	tage to the	e nearest l	ease or un	it boundary line. Show the predicted locations of
					-			as Surface Owner Notice Act (House Bill 2032).
.0000.00	ao, tam. o	лиооо, р. <sub>і</sub>	50m100 a.r.			-	plat if desi	
				100 III	ay allacii e	а зерагате		154 ft.
	<b>:</b>	:	<b>:</b>		: :	:		) 27 ft.
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		:				:		O Well Location
	:	:	:		:	:		
		:	:			:		Tank Battery Location
	•				•	:	:	Tank Battery Location
				•••••		:		Pipeline Location
				•••••		: :		Pipeline Location Electric Line Location
••••						: : :		Pipeline Location
								Pipeline Location Electric Line Location
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								Pipeline Location Electric Line Location Lease Road Location
			3	•••••				Pipeline Location Electric Line Location
			3	•••••				Pipeline Location Electric Line Location Lease Road Location
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			3	•••••				Pipeline Location Electric Line Location Lease Road Location  EXAMPLE
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			3	•••••				Pipeline Location Electric Line Location Lease Road Location  EXAMPLE
			3	•••••				Pipeline Location Electric Line Location Lease Road Location  EXAMPLE

SEWARD CO. 3390' FEL

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.;
- 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.

### CORRECTION #1

KOLAR Document ID: 1584893

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	SecTwp R	
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:		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)	
If the pit is lined give a brief description of the li material, thickness and installation procedure.			dures for periodic maintenance and determining cluding any special monitoring.	
Distance to nearest water well within one-mile of	of pit:	Depth to shallowest fresh water feet. Source of information:		
feet Depth of water well	feet	measured well owner electric log KDWR		
Emergency, Settling and Burn Pits ONLY:		Drilling, Workover and Haul-Off Pits ONLY:		
Producing Formation:		Type of material utilized in drilling/workover:		
Number of producing wells on lease:		Number of working pits to be utilized:		
Barrels of fluid produced daily:		Abandonment procedure:		
Does the slope from the tank battery allow all spilled fluids to flow into the pit?   Yes   No		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	

### CORRECTION #1

KOLAR Document ID: 1584893

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	thodic Protection Borehole Intent) T-1 (Transfer) CP-1 (Plugging Application)
OPERATOR: License #	Well Location:
Name:	
Address 1:	County:
Address 2:	Lease Name: Well #:
City:	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:+	
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodi 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:	patteries, pipelines, and electrical lines. The locations shown on the plat
I certify that, pursuant to the Kansas Surface Owner Notice Accowner(s) of the land upon which the subject well is or will be loce 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	eated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form being filed is a Form C-1 or Form CB-1, the plat(s) required by this d email address.
I have not provided this information to the surface owner(s). I ack KCC will be required to send this information to the surface own task, I acknowledge that I must provide the name and address of that I am being charged a \$30.00 handling fee, payable to the KC	er(s). To mitigate the additional cost of the KCC performing this if the surface owner by filling out the top section of this form and
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	
I	-

# **Summary of Changes**

API/Permit #: 15-081-22231-00-00

Doc ID: 1584893

Correction Number: 1

Approved By: Rick Hestermann 08/03/2021

Field Name	Previous Value	New Value
KCC Only - Approved By	Rick Hestermann 06/03/2021	Rick Hestermann 08/03/2021
KCC Only - Approved Date	06/03/2021	08/03/2021
Surface Owner City	TULSA	Copeland
Surface Owner Name	ONEOK	Western Farms, Inc; M.
Surface Owner Ivallie	ONEOR	Koehn
Surface Owner State Name	OK	
Surface Owner State		Koehn