For KCC	Use:					
Effective Date:						
District #						
SGA?	Yes 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:
month day year	Sec Twp S. R [ E [ ] \
DPERATOR: License#	feet from N / S Line of Section
Vame:	feet from E / W Line of Section
Address 1:	Is SECTION: Regular Irregular?
Address 2:	(Note: Locate well on the Section Plat on reverse side)
City:	County:
Contact Person:	Lease Name: Well #:
hone:	Field Name:
CONTRACTOR: License#	Is this a Prorated / Spaced Field?
lame:	Target Formation(s):
Mall Deillad Fore Mall Classes Time Foreignmont	Nearest Lease or unit boundary line (in footage):
Well Drilled For: Well Class: Type Equipment:	Ground Surface Elevation:feet MS
Oil Enh Rec Infield Mud Rotary	Water well within one-quarter mile:
Gas Storage Pool Ext. Air Rotary	Public water supply well within one mile:
Disposal Wildcat Cable	Depth to bottom of fresh water:
Seismic ; # of Holes Other	Depth to bottom of usable water:
Other:	Surface Pipe by Alternate: I III
If OWWO: old well information as follows:	Length of Surface Pipe Planned to be set:
	Length of Conductor Pipe (if any):
Operator:	, , ,
Well Name:	Projected Total Depth:
Original Completion Date: Original Total Depth:	Formation at Total Depth:
Directional, Deviated or Horizontal wellbore?	Well Farm Pond Other:
f Yes, true vertical depth:	
Bottom Hole Location:	DWR Permit #:(Note: Apply for Permit with DWR )
(CC DKT #:	Will Cores be taken?
	If Yes, proposed zone:
AFF	IDAVIT
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Well will not be drilled or Permit Expired Date: \_

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:					_ Loc	Location of Well: County:									
Lease:								fe	et from	N /	S Line	of Section			
Well Number:								fe	et from	E /	W Line	of Section			
Field:						_	SecTwpS. R 🗌 E 🗍 W								
	umber of Acres attributable to well:					13 (	Is Section: Regular or Irregular								
QINQIN	ZIN/QIN	oi acreagi	J			-									
								If Section is Irregular, locate well from nearest corner boundary.							
							Se	Section corner used: NE NW SE SW							
					footage to d electrical You ma	the neare	required b		as Surfac ired.						
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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 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					
Settling Pit Drilling Pit	If Existing, date cor	nstructed:	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 SectionCounty					
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 Source of infor	west fresh water feet. 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 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 s flow into the pit? Yes No	pilled fluids to	Drill pits must be closed within 365 days of spud date.						
Submitted Electronically								
	KCC	OFFICE USE O	NLY  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
July 2021
Form Must Be Typed
Form must be Signed
All blanks must be Filled

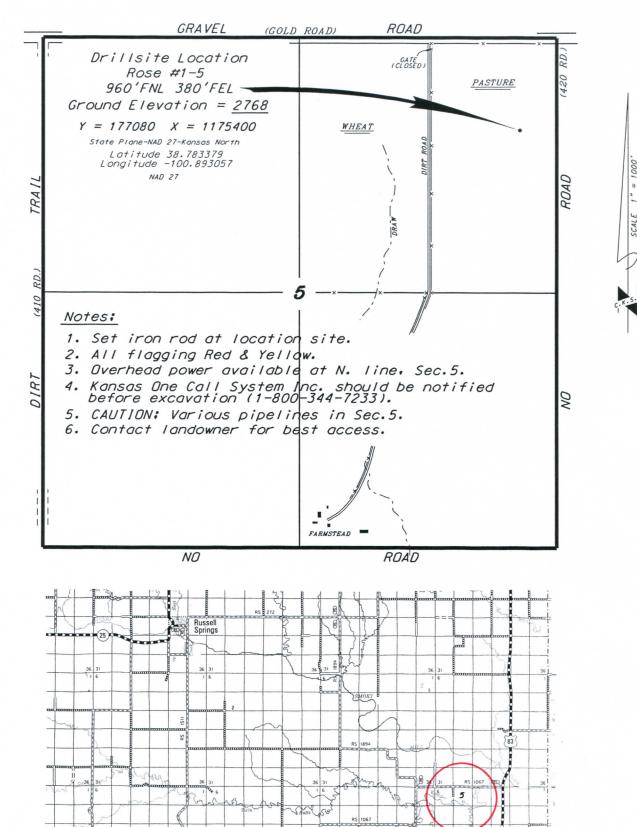
# CERTIFICATION OF COMPLIANCE WITH THE KANSAS SURFACE OWNER NOTIFICATION ACT

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
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:+	
provided the following to the surface owner(s) of the land upon Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing	batteries, pipelines, and electrical lines. The locations shown on the plat the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.  Act (see Chapter 55 of the Kansas Statutes Annotated), I have on which the subject well is or will be located: 1) a copy of the in connection with this form; 2) if the form being filed is a Form
the KCC will be required to send this information to the surface	acknowledge that, because I have not provided this information, owner(s). To mitigate the additional cost of the KCC performing
and that I am being charged a \$30.00 handling fee, payable to the	ess of the surface owner by filling out the top section of this form he KCC, 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	

PROLIFIC RESOURCES, LLC ROSE LEASE NE. 1/4. SECTION 5. T15S. R32W LOGAN COUNTY. KANSAS

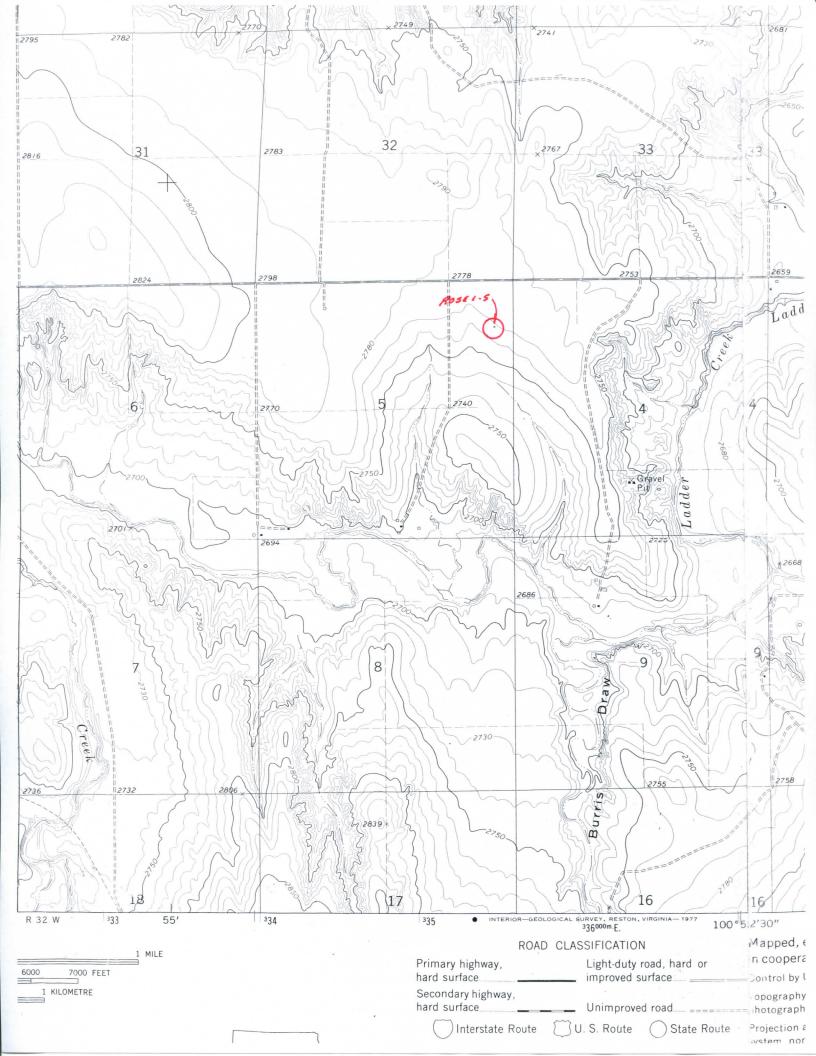


<sup>\*</sup>Controlling data is based upon the best maps and photographs available to us and upon a regular section of land containing 640 acres.

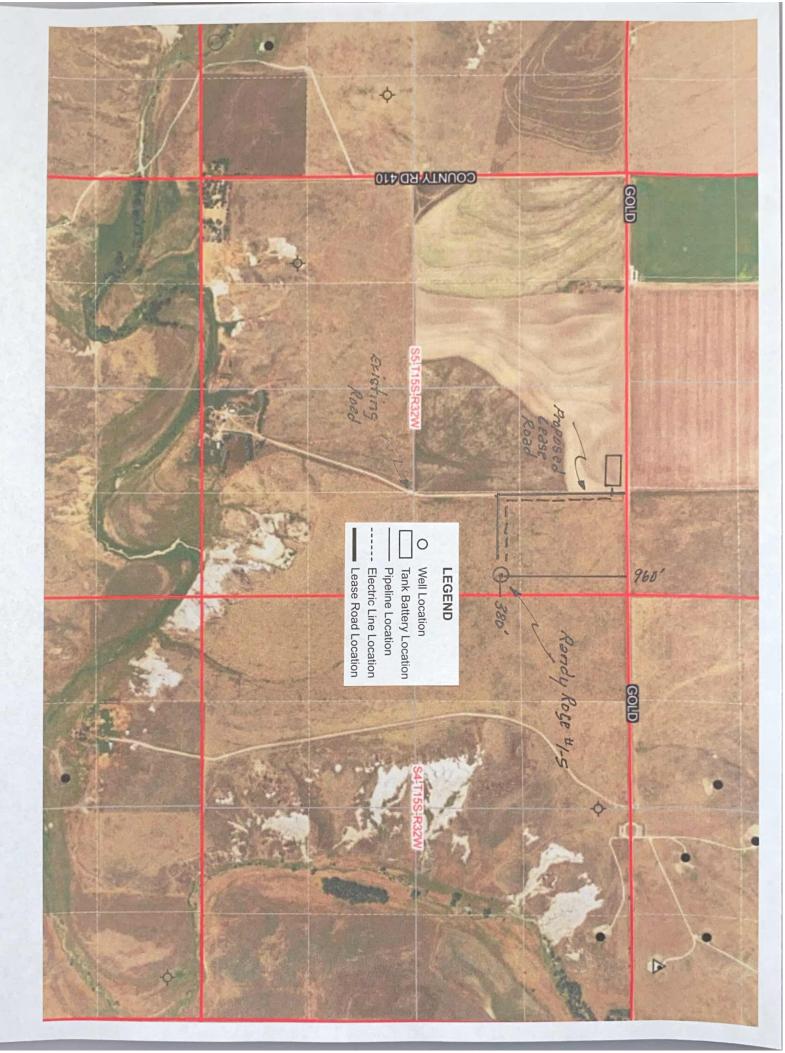
May 18, 2022

<sup>\*</sup>Approximate section lines were determined using the normal standard of care of oilfield surveyors practicing in the state of Kansas. The section corners, which establish the precise section lines, were not necessarily located, and the exact location of the drillsite location in the section is not guaranteed. Therefore, the operator securing this service and accepting this plot and all other parties relying thereon agree to hold Central Kansas Biffield Services. Inc., its officers and employees harmless from all losses, costs and expenses and said entities released from any liability from incidental or consequential damages.

\*Elevations derived from National Geodetic Vertical Datum.



WATER WELL RECORD Form WWC-5  Original Record Correction Change in Well Use  Division of Water Resources App. No.  Well ID												
1 LOCATION OF WATER WELL: Fraction							on Numbe				ge Number	
County: LOSAN SE- 45E- 45E						beckie	ection Number   Township Number   Range Number   T /S   R 72   E					
2 WELL	OWNER: L	35€	Street or	Rural		where	e well is located (if					
Business:				First: Randy	direction fr	om nea	rest town or	r inters	ection): If at owner's	ddress, c	heck here:	
Address: Address:							1	ELKAdel	Ks			
	2xKlas		State: 155	ZIP: 67148	15		2	7 -	ZAMUCK	17.		
3 LOCATE WELL 4 DEPTH OF COMPLETED WELL: 20 ft. 5 Latitude: (decimal decimal d												
WITH "	X" IN				ude: .		(	decimal degrees)				
SECTIO				Encountered: 1)		740	Long	itude	:	(	decimal degrees)	
N		WELL'S S	TATIC WA	3) ft., or 4) TER LEVEL:	Dry Wel				WGS 84 NAD 8	O N	AD 27	
N. SEPTION	12 F7 W			, measured on (mo-day		741	Sourc	atitude/Longitude:				
NW	NE			, measured on (mo-day				1PS (U	nit make/model:	- DN	······)	
1 1 2		Pump test d	ata: Well w	vater was	ft.				urvey Topograph		3)	
W	E	after		s pumping					Mapper:			
sw	SE			vater was								
		Estimated \	riold:	s pumping	. gpm		6 Eleva	tion:		Ground	Level TTOC	
	3	Bore Hole	Diameter:		ft and				Land Survey GPS			
1 m	nile	91000		in. to			Hallana.		Other			
7 WELL	WATER TO	BE USED	AS:	CALL SHEET TO COME		3,734	Water die	MU	(A) (4) (1) (A) (A) (A)	9 1111	4	
1. Domestic:				ater Supply: well ID			10.20	il Field	d Water Supply: lease	Ro	8 = L	
Housel		6.	Dewaterin	ng: how many wells?			11. Test	Hole:	well ID			
Lawn &				echarge: well ID					☐ Uncased ☐ Geo			
☐ Livesto 2. ☐ Irrigati				g: well ID					l: how many bores?			
3. Feedlo			Air Sparg	al Remediation: well I					Loop  Horizontal			
4. Industr	The second secon		Recovery		Latiaction				pecify):			
Was a che	mical/bacte	riological sa	mple subr	nitted to KDHE?	Ves SKN	Jo I			ple was submitted: .			
Water well	disinfected'	≥ Yes □	No	inted to RDITE:	1163 251		i yes, dan	C Sain	pie was submitted			
8 TYPE C	F CASING	USED:	Steel PLPV	/C Other	CA	SING	JOINTS	: DX	Glued   Clamped	Welded	☐ Threaded	
Casing diam	eter	in. to	2.0 ft.	Diameter	. in. to		. ft., Dian	neter .	in. to	ft.		
Casing heigh	nt above land	surface 1.2	200	n. Weight2	5 lbs.	ft.	Wall thick	kness (	or gauge No?	٠		
TYPE OF	SCREEN O	R PERFORA	TION MA	TERIAL:								
☐ Steel ☐ Brass		inless Steel vanized Steel	Fibe			Lata	Oth	her (Sp	pecify)			
		RATION OPI			used (open	noie)						
	nuous Slot	☐ Mill Slot			orch Cut [	7 Dril	led Holes	П	Other (Specify)	a Cida		
☐ Louve	ered Shutter	☐ Key Pund	ched UV	Vire Wrapped S	aw Cut [	☐ Non	e (Open H	Hole)				
SCREEN-I	PERFORAT	ED INTERV	ALS: From	m 10 ft. to 2.4	2 ft., Fro	m	ft. to	o	ft., From	ft. to .	ft.	
				m 1.0 ft. to 2								
9 GROUT	MATERI.	AL: Neat	cement	Cement grout	entonite	☐ Oth	er					
				ft., From	. ft. to		. ft., From		ft. to	ft.		
		le contaminat	tion: Lateral Lin	es Pit Privy		О.:	wastaak Da	12.3		C		
☐ Septic			Cess Pool	Sewage L	ลยดดก		vestock Pe iel Storage		☐ Insecticide		Vall	
	ight Sewer Li						rtilizer Sto		Oil Well/C			
☐ Other (	Specify)	Russ	Seepage Pi			10			The same of the same			
		<u> </u>							ft.	1989		
10 FROM	то		LITHOLO	GIC LOG	FROM	1	то	LITH	IO. LOG (cont.) or PL	UGGINO	INTERVALS	
0	9	Clay	1		E SUSSILES		A TOTAL SERVICE		A grade a true and	vudliki Y	0.00 - 30 / 25 34	
9	19	- Siane	•	TO THE RESERVE OF THE PARTY OF				1.30		1.42		
19	ورد	3 nac		Tomas Maria - Maria - Carlos - Maria -		32 2						
	A Tiple SA In		Allege Method			100		7			TO BY IS	
	50 x 151 250		100 100 1	The Manhatta Let I	and Production	100	100.16	Ind. AVI	Aug Tarana	all all a		
Notes:								all a like del				
City was the			ALDE TO		4 1 1							
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged												
under my j	under my jurisdiction and was completed on (mo-day-year)											
Kansas Wa	ter Well Co	e of	CHISC NO.	willing L. L.	L. Well				ed on (mo-day-year		·	
				ER and retain one copy for y							nov to Kansas	
INSTRUC	Department of H	ealth and Environ	nent, Bureau o	Water, Geology Section, 100	00 SW Jackson	St., Sui	te 420, Topek	ka, Kans	sas 66612-1367. Telephone (	785) 296-35	65.	
Visit us	at http://www.kd	heks.gov/waterwel	l/index.html	The walter was	KSA	32a-1212	2	224	or diagnostics	Revise	d 9/10/2012	



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

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

June 13, 2022

Darrell L. Willinger Prolific Resources LLC 250 N OLD MANOR RD WICHITA, KS 67208-4137

Re: Drilling Pit Application Rose 1-5 NE/4 Sec.05-15S-32W Logan County, Kansas

## Dear Darrell L. Willinger:

District staff has inspected the above referenced location and has determined that the reserve pit shall be constructed <u>without slots</u>, 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 within 72 hours of completion of drilling operations.

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 (785) 261-6250 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 (785) 261-6250.