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:						
DPERATOR: License#	Sec Twp S. R E V						
lame:	feet from E / W Line of Section						
ddress 1:	Is SECTION: Regular Irregular?						
ddress 2:	(Note: Locate well on the Section Plat on reverse side)						
ity: State: Zip: +	County:						
ontact Person:hone:	Lease Name: Well #:						
TIONS	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):						
Oil Enh Rec Infield Mud Rotary	Ground Surface Elevation:feet MS						
Gas Storage Pool Ext. Air Rotary	Water well within one-quarter mile: Public water supply well within one mile: Yes N Yes N						
Disposal Wildcat Cable	Public water supply well within one mile: Yes Yes Yes						
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:						
0	Length of Conductor Pipe (if any):						
Operator:	Projected Total Depth:						
Original Completion Date: Original Total Depth:	Formation at Total Depth:						
	Water Source for Drilling Operations:						
irectional, Deviated or Horizontal wellbore? Yes No	Well Farm Pond Other:						
Yes, true vertical depth:	DWR Permit #:						
Bottom Hole Location:	(Note: Apply for Permit with DWR)						
	MCII O - 4 - 1 0						
OO DICT π.							
(CC DKT #:	If Yes, proposed zone:						
AF	If Yes, proposed zone:						
AF The undersigned hereby affirms that the drilling, completion and eventual pl	If Yes, proposed zone:						
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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.

•										y:feet		N /	S Line	of Section		
Lease:							feet from N / S Line of Section feet from E / W Line of Section									
Field:					Se	SecTwpS. R E W										
							- If :	Section is	Irregular, I	ocate well	from nea			dary.		
	lease roa				d electrica	al lines, as	required b		as Surface	how the pre			2032).			
330 ft.		:	: :	:		:	:	:			LEGEN	ND				
											Well Lo Tank Ba Pipeline Electric		n ation			
			<u></u>	1	 5	<u></u>		: :		EXAMPLE :		: : : : :				
		:			•••••	:	· · · · · · · · · · · · · · · · · · ·	:								
											0-7			1980' FSL		
		:	:	:		:	:	:	SE	EWARD 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 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 Section					
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?	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 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 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:	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:							
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 provided the following to the surface owner(s) of the land upon	dic Protection Borehole Intent), you must supply the surface owners and batteries, pipelines, and electrical lines. The locations shown on the plat of 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 gin connection with this form; 2) if the form being filed is a Form operator name, address, phone number, fax, and email address.						
the KCC will be required to send this information to the surface this task, I acknowledge that I must provide the name and addr and that I am being charged a \$30.00 handling fee, payable to the surface of the surface	acknowledge that, because I have not provided this information, owner(s). To mitigate the additional cost of the KCC performing tess of the surface owner by filling out the top section of this form the KCC, which is enclosed with this form. The with this form. If the fee is not received with this form, the KSONA-1						
form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1							
Submitted Electronically							

