CORRECTION #2

KOLAR Document ID: 1703707

For KCC	Use:	
Effective I	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:
	year,,, Sec Twp S. R E V
DPERATOR: License#	(Q/Q/Q/Q) feat from N / S Line of Section
lame:	fact from E / W Line of Section
ddress 1:	LOCATION D. L. D. L. O.
ddress 2:	
City: State: Zip:	
ontact Person:	Lease Name: Well #:
hone:	Field Name:
CONTRACTOR: License#	Is this a Prorated / Spaced Field?
lame:	
Well Drilled For: Well Class: Type	e Equipment: Nearest Lease or unit boundary line (in footage):
	Ground Surface Flevation: feet MS
	Mud Rotary Air Rotary Water well within one-quarter mile: Yes N
	Cable Public water supply well within one mile: Yes N
Seismic : # of Holes Other	Depth to bottom of fresh water:
Other:	Depth to bottom of usable water:
	Surface Pipe by Alternate: I II
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	·
	Water Source for Drilling Operations:
Directional, Deviated or Horizontal wellbore?	Yes No Farm Pond Other:
Yes, true vertical depth:	BWICT GITTIE #.
Sottom Hole Location: CCC DKT #:	(Note. Apply for Fernit with DWK)
	will cores be taken?
	If Yes, proposed zone:
	AFFIDAVIT
"ha undersigned hereby affirms that the drilling	etion and eventual plugging of this well will comply with K.S.A. 55 et. seg.
The undersigned hereby animis that the drilling, comple	
0 ,	. 35 5
t is agreed that the following minimum requirements wil	Il be met:
0 ,	Il be met: ding of well;
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Well will not be drilled or Permit Expired Date: _

Signature of Operator or Agent:

KOLAR Document ID: 1703707



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:
_ease:	feet from N / S Line of Section
Vell Number:	feet from E / W Line of Section
Field:	SecTwpS. R
Number of Acres attributable to well:	is Section. Regular of Integular
	If Section is Irregular, locate well from nearest corner boundary. Section corner used: NE NW SE SW
lease roads, tank batteries, pipelines and electrical lir	PLAT e nearest lease or unit boundary line. Show the predicted locations of nes, as required by the Kansas Surface Owner Notice Act (House Bill 2032). attach a separate plat if desired. 335 ft.
	835 ft. LEGEND
	OSS II. LEGEND
	O Well Location Tank Battery Location Pipeline Location Electric Line Location
	Lease Road Location
32	EXAMPLE
	1980' FSL

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 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.

CORRECTION #2

KOLAR Document ID: 1703707

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 East WestFeet from North / South Line of Section	
Settling Pit Drilling Pit	If Existing, date constructed:			
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 Area? Yes N		No	Chloride concentration: mg/l (For Emergency Pits and Settling Pits only)	
Is the bottom below ground level? Yes No Artificial Liner? Yes No		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 pit:		Depth to shallo Source of inform	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 p	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 OFFICE USE ONLY Liner Steel Pit RFAC RFAS				
Date Received: Permit Numl	ber:	Permi	t Date: Lease Inspection:	

CORRECTION #2

KOLAR Document ID: 1703707

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 (C	Cathodic Protection Borehole Intent) T-1 (Transfer) CP-1 (Plugging Application)	
OPERATOR: License #	Well Location:	
Name:	SecTwpS. R	
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:+		
the KCC with a plat showing the predicted locations of lease roads, tank	dic Protection Borehole Intent), you must supply the surface owners and a batteries, pipelines, and electrical lines. The locations shown on the plat in the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.	
Select one of the following:		
provided the following to the surface owner(s) of the land up Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing C-1 or Form CB-1, the plat(s) required by this form; and 3) my one of the surface owner(s).	Act (see Chapter 55 of the Kansas Statutes Annotated), I have son which the subject well is or will be located: 1) a copy of the g in connection with this form; 2) if the form being filed is a Form operator name, address, phone number, fax, and email address. acknowledge that, because I have not provided this information, e owner(s). To mitigate the additional cost of the KCC performing	
this task, I acknowledge that I must provide the name and add and that I am being charged a \$30.00 handling fee, payable to	ress of the surface owner by filling out the top section of this form the 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-	fee with this form. If the fee is not received with this form, the KSONA-1 will be returned.	
Submitted Electronically		

Summary of Changes

Lease Name and Number: Balsmeier 21-32

API/Permit #: 15-117-20028-00-00

New Doc ID: 1703707 Parent Doc ID: 1701319 Correction Number: 2

Approved By: CeLena Peterson 03/10/2023

Field Name	Previous Value	New Value
KCC Only - Approved By	CeLena Peterson 03/02/2023	CeLena Peterson 03/10/2023
KCC Only - Approved Date	03/02/2023	03/10/2023
KCC Only - Date Received	02/28/2023	03/07/2023
Length of Surface Pipe Planned to be set	2400	250