| 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

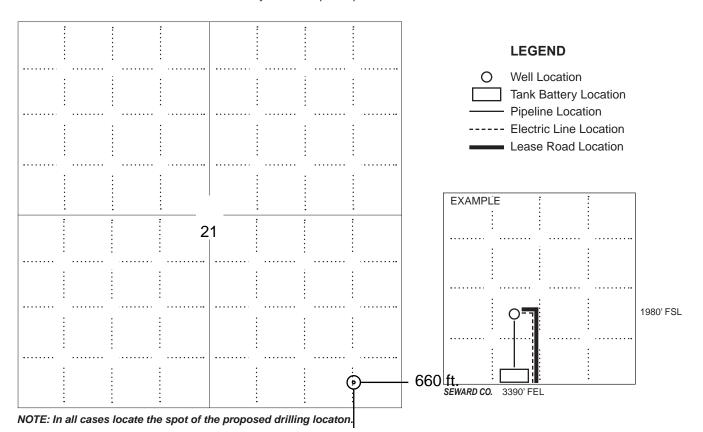
In all cases, please fully complete this side of the form. Include items 1 through 5 at the bottom of this page.

| Operator: | Location of Well: County: |
|---------------------------------------|--|
| Lease: | feet from N / S Line of Section |
| Well Number: | feet from E / W Line of Section |
| Field: | Sec Twp S. R |
| Number of Acres attributable to well: | Is Section: Regular or Irregular |
| | If Section is Irregular, locate well from nearest corner boundary. Section corner used: NE NW SE SW |

PLAT

Show location of the well. Show footage to the nearest lease or unit boundary line. Show the predicted locations of lease roads, tank batteries, pipelines and electrical lines, as required by the Kansas Surface Owner Notice Act (House Bill 2032).

You may attach a separate plat if desired.



350 ft.

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 | SecTwpR East West | | | |
| 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:(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 | | | |
| material, thickness and installation procedure. liner integrity, including 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, 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 ONLY 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 (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 | |

| Township: | | Range: | | County: | | State: | |
|-----------|--|--------|--|---------|---|----------------------|-------------|
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| | | | | | | 350' FSL 660' FEL | |
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Tank Battery

__ Pipeline

Road

Electric Line

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

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

September 13, 2023

Dan Windholz FourWinds Oil Corporation PO BOX 1063 HAYS, KS 67601-1063

Re: Drilling Pit Application Glennemeier A 4 SE/4 Sec.21-05S-21W Norton County, Kansas

Dear Dan Windholz:

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.

KEEP PITS away from draw/drainage.

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.