

For KCC Use:Effective Date: 07/14/2024District # 2SGA? ☒ 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****Must be approved by KCC five (5) days prior to commencing well****Form KSONA-1, Certification of Compliance with the Kansas Surface Owner Notification Act, MUST be submitted with this form.**Expected Spud Date: 08/08/2024
month day yearOPERATOR: License# 36049Name: HYT Operating LLCAddress 1: 112 SW 7TH STREET SUITE 3C

Address 2: _____

City: TOPEKA State: KS Zip: 66603 + _____Contact Person: Ken BullPhone: 405-979-3748

CONTRACTOR: License# _____

Name: Advise on ACO-1 -- Must be licensed by KCC**Well Drilled For:****Well Class:****Type Equipment:**

☐ Oil	☐ Enh Rec	☐ Infield	☒ Mud Rotary
☐ Gas	☐ Storage	☐ Pool Ext.	☐ Air Rotary
	☐ Disposal	☒ Wildcat	☐ Cable
☐ Seismic ; _____ # of Holes	☐ Other		
☒ Other: <u>STRAT</u>			

☐ If OWWO: old well information as follows:

Operator: _____

Well Name: _____

Original Completion Date: _____ Original Total Depth: _____

Directional, Deviated or Horizontal wellbore? ☐ Yes ☒ No

If Yes, true vertical depth: _____

Bottom Hole Location: _____

KCC DKT #: _____

Spot Description: _____

SE - NW - SW - SW Sec. 20 Twp. 10 S. R. 09 ☒ E ☐ W
(Q/Q/Q/Q) 944 feet from ☐ N / ☒ S Line of Section
402 feet from ☐ E / ☒ W Line of Section

Is SECTION: ☒ Regular ☐ Irregular?**(Note: Locate well on the Section Plat on reverse side)**County: RileyLease Name: Sue Duroche Well #: 3Field Name: UnnamedIs this a Prorated / Spaced Field? ☐ Yes ☒ NoTarget Formation(s): PrecambrianNearest Lease or unit boundary line (in footage): 335Ground Surface Elevation: 1000 Estimated _____ feet MSLWater well within one-quarter mile: ☐ Yes ☒ NoPublic water supply well within one mile: ☐ Yes ☒ NoDepth to bottom of fresh water: 60Depth to bottom of usable water: 140Surface Pipe by Alternate: ☒ I ☐ IILength of Surface Pipe Planned to be set: 200

Length of Conductor Pipe (if any): _____

Projected Total Depth: 4000Formation at Total Depth: Precambrian

Water Source for Drilling Operations:

☐ Well ☐ Farm Pond ☒ Other: Contractor

DWR Permit #: _____

(Note: Apply for Permit with DWR ☐)Will Cores be taken? ☐ Yes ☒ No

If Yes, proposed zone: _____

AFFIDAVIT

The undersigned hereby affirms that the drilling, completion and eventual plugging of this well will comply with K.S.A. 55 et. seq.

It is agreed that the following minimum requirements will be met:

1. Notify the appropriate district office **prior** to spudding of well;
2. A copy of the approved notice of intent to drill **shall be** posted on each drilling rig;
3. The minimum amount of surface pipe as specified below **shall be set** by circulating cement to the top; in all cases surface pipe **shall be set** through all unconsolidated materials plus a minimum of 20 feet into the underlying formation.
4. If the well is dry hole, an agreement between the operator and the district office on plug length and placement is necessary **prior to plugging**;
5. The appropriate district office will be notified before well is either plugged or production casing is cemented in;
6. If an ALTERNATE II COMPLETION, production pipe shall be cemented from below any usable water to surface within **120 DAYS** of spud date. Or pursuant to Appendix "B" - Eastern Kansas surface casing order #133,891-C, which applies to the KCC District 3 area, alternate II cementing must be completed within 30 days of the spud date or the well shall be plugged. **In all cases, NOTIFY district office** prior to any cementing.

Submitted Electronically**For KCC Use ONLY**API # 15 - 15-161-20086-00-00Conductor pipe required 0 feetMinimum surface pipe required 160 feet per ALT. ☒ I ☐ IIApproved by: CeLena Peterson 12/05/2024**This authorization expires:** 07/09/2025*(This authorization void if drilling not started within 12 months of approval date.)*

Spud date: _____ Agent: _____

Remember to:

- File Certification of Compliance with the Kansas Surface Owner Notification Act (KSONA-1) with Intent to Drill;
- File Drill Pit Application (form CDP-1) with Intent to Drill;
- File Completion Form ACO-1 within 120 days of spud date;
- File acreage attribution plat according to field proration orders;
- Notify appropriate district office 48 hours prior to workover or re-entry;
- Submit plugging report (CP-4) after plugging is completed (within 60 days);
- Obtain written approval before disposing or injecting salt water.
- If well will not be drilled or permit has expired (See: authorized expiration date) please check the box below and return to the address below.

☐ **Well will not be drilled or Permit Expired** Date: _____

Signature of Operator or Agent: _____

20 10 09

☒ E ☐ W

For KCC Use ONLY

API # 15 - 15-161-20086-00-00

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: HYT Operating LLC

Lease: Sue Duroche

Well Number: 3

Field: Unnamed

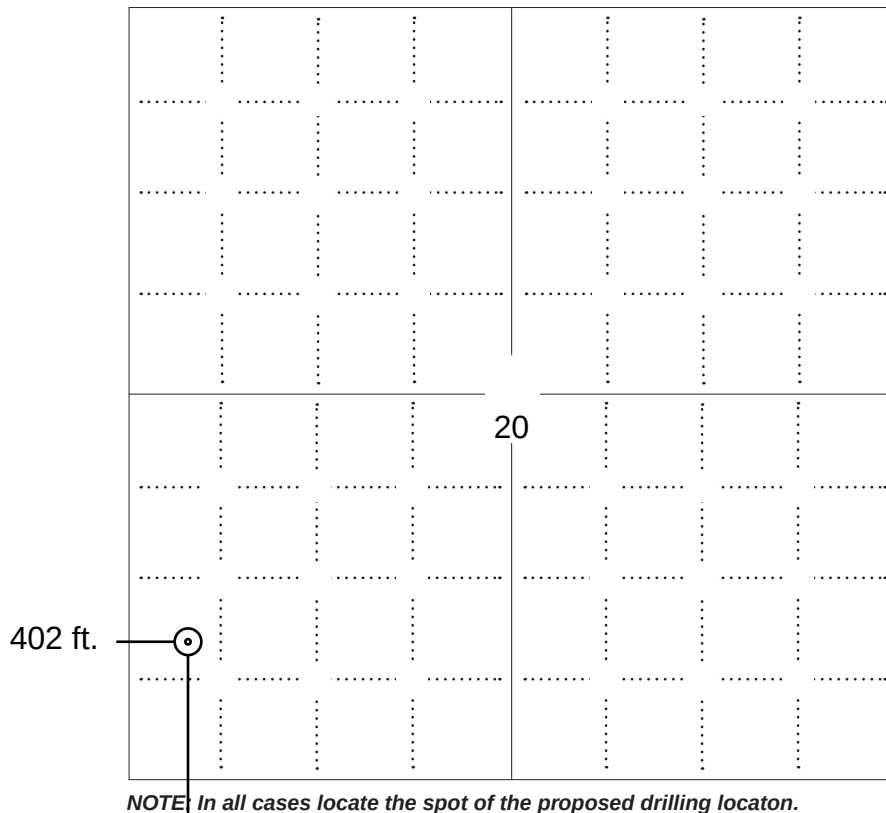
Number of Acres attributable to well: _____

QTR/QTR/QTR/QTR of acreage: SE - NW - SW - SW

Location of Well: County: Riley

944 feet from ☐ N / ☒ S Line of Section402 feet from ☐ E / ☒ W Line of SectionSec. 20 Twp. 10 S. R. 09 ☒ E ☐ WIs 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.

**NOTE** In all cases locate the spot of the proposed drilling location.

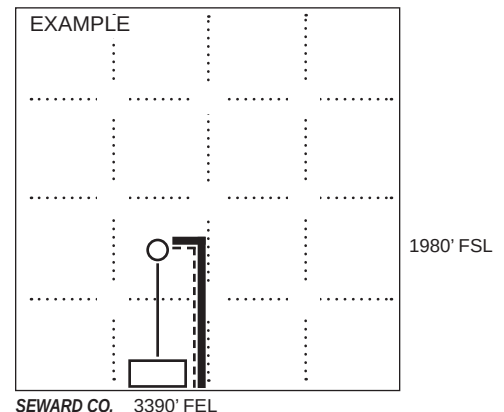
944 ft.

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.

LEGEND

- ☐ Well Location
- ☐ Tank Battery Location
- Pipeline Location
- - - - Electric Line Location
- Lease Road Location



KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISIONForm CDP-1
May 2010
Form must be Typed

APPLICATION FOR SURFACE PIT

Submit in Duplicate

Operator Name: HYT Operating LLC		License Number: 36049	
Operator Address: 112 SW 7TH STREET SUITE 3C		TOPEKA KS 66603	
Contact Person: Ken Bull		Phone Number: 405-979-3748	
Lease Name & Well No.: Sue Duroche 3		Pit Location (QQQQ): SE - NW - SW - SW Sec. 20 Twp. 10 R. 09 ☒ East ☐ West 944 Feet from ☐ North / ☒ South Line of Section 402 Feet from ☐ East / ☒ West Line of Section Riley County	
Type of Pit: ☐ Emergency Pit ☐ Burn Pit ☐ Settling Pit ☒ Drilling Pit ☐ Workover Pit ☐ Haul-Off Pit (If WP Supply API No. or Year Drilled)	Pit is: ☒ Proposed ☐ Existing If Existing, date constructed: _____ Pit capacity: 5700 (bbls)		
Is the pit located in a Sensitive Ground Water Area? ☒ Yes ☐ No		Chloride concentration: _____ mg/l (For Emergency Pits and Settling Pits only)	
Is the bottom below ground level? ☒ Yes ☐ No	Artificial Liner? ☐ Yes ☒ No	How is the pit lined if a plastic liner is not used? Native and Fresh Mud	
Pit dimensions (all but working pits): 80 Length (feet) 80 Width (feet) ☐ N/A: Steel Pits Depth from ground level to deepest point: 5 (feet) ☐ No Pit			
If the pit is lined give a brief description of the liner material, thickness and installation procedure.		Describe procedures for periodic maintenance and determining liner integrity, including any special monitoring.	
Distance to nearest water well within one-mile of pit: 2043 feet Depth of water well 58 feet		Depth to shallowest fresh water 20 feet. Source of information: ☐ measured ☒ well owner ☐ electric log ☒ KDWR	
Emergency, Settling and Burn Pits ONLY: Producing Formation: _____ Number of producing wells on lease: _____ Barrels of fluid produced daily: _____ Does the slope from the tank battery allow all spilled fluids to flow into the pit? ☐ Yes ☐ No		Drilling, Workover and Haul-Off Pits ONLY: Type of material utilized in drilling/workover: Fresh Water Number of working pits to be utilized: 1 Abandonment procedure: Allow Liquid contents to evaporate then backfill Drill pits must be closed within 365 days of spud date.	
Submitted Electronically			

KCC OFFICE USE ONLY

☐ Liner ☐ Steel Pit ☒ RFAC ☐ RFAS

Date Received: **12/04/2024** Permit Number: **15-161-20086-00-00** Permit Date: **07/09/2024** Lease Inspection: ☐ Yes ☒ No

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** (Cathodic Protection Borehole Intent) ☐ **T-1** (Transfer) ☐ **CP-1** (Plugging Application)

OPERATOR: License # 36049
Name: HYT Operating LLC
Address 1: 112 SW 7TH STREET SUITE 3C
Address 2: _____
City: TOPEKA State: KS Zip: 66603 + _____
Contact Person: HYT Operating LLC
Phone: (405) 9793748 Fax: (_____) _____
Email Address: ken@hyterra.com

Well Location:
SE NW SW SW Sec. 20 Twp. 10 S. R. 09 ☒ East ☐ West
County: Riley
Lease Name: Sue Duroche Well #: 3
If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:

Surface Owner Information:

Name: Sue Duroche
Address 1: 2140 East 153rd Terrace
Address 2: _____
City: Olathe State: Kansas Zip: 66062 + _____

When filing a Form T-1 involving multiple surface owners, attach an additional 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 county, and in the real estate property tax records of the county treasurer.

If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.

Select one of the following:

- ☒ I certify that, pursuant to the Kansas Surface Owner Notice Act (see Chapter 55 of the Kansas Statutes Annotated), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address.
- ☐ I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I must provide the name and address of the surface owner by filling out the top section of this form and that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.

If choosing the second option, submit payment of the \$30.00 handling fee 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 will be returned.

I Submitted Electronically

I

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Summary of Changes

Lease Name and Number: Sue Duroche 3

API/Permit #: 15-161-20086-00-00

New Doc ID: 1804975

Parent Doc ID: 1785200

Correction Number: 1

Approved By: CeLena Peterson 12/05/2024

Field Name	Previous Value	New Value
KCC Only - Approved By	CeLena Peterson 07/09/2024	CeLena Peterson 12/05/2024
KCC Only - Approved Date	07/09/2024	12/05/2024
KCC Only - Lease Inspection	Yes	No
KCC Only - Date Received	07/08/2024	12/04/2024
Projected Total Depth	2500	4000