CORRECTION #1

KOLAR Document ID: 1806067

For KCC Use:	Kansas Corporation Commission
Effective Date:	OIL & GAS CONSERVATION DIVISION
District #	OIL & ONE CONCERNATION DIVIDION

SGA? Yes No

Form CB-1
Oct 2016
Form must be Typed
Form must be Signed
All blanks must be Filled

CATHODIC PROTECTION BOREHOLE INTENT

Must be approved by the KCC sixty (60) days prior to commencing well.

Expected Spud Date:	Spot Description:
month day year	
OPERATOR: License#	feet from N / S Line of Section
Name:	feet from E / W Line of Section
Address 1:	Is SECTION: Regular Irregular?
Address 2:	(Check directions from nearest outside corner boundries)
City: State: Zip: +	County:
Contact Person:Phone:	Facility Name:
FIIII C.	Borehole Number:
CONTRACTOR: License#	Ground Surface Elevation: MSI
Name:	Cathodic Borehole Total Depth:
Type Drilling Equipment:	Depth to Bedrock: feet Water Information
Air Rotary United Other	Aguifer Penetration: None Single Multiple
Construction Features	Depth to bottom of fresh water:
Length of Cathodic Surface (Non-Metallic) Casing Planned to be set:	Depth to bottom of usable water:
Length of Conductor pipe (if any):	Water well within one-quarter mile: Yes No
Surface casing borehole size: inches	Public water supply well within one mile: Yes No
Cathodic surface casing size: inches	Water Source for Drilling Operations:
Cathodic surface casing centralizers set at depths of:; ;	
	Water Well Location:
Cathodic surface casing will terminate at:	DWR Permit #
Above surface Surface Vault Below Surface Vault	Standard Dimension Ratio (SDR) is =
Pitless casing adaptor will be used: Yes No Depth feet	(Cathodic surface csg. O.D. in inches / MWT in inches = SDR)
Anode installation depths are:;; ;; ;;	Annular space between borehole and casing will be grouted with:
	Concrete Neat Cement Bentonite Cement Bentonite Clay
;;;;;;	Anode vent pipe will be set at: feet above surface
	Anode conductor (backfill) material TYPE:
	Depth of TOP of Backfill installation material:
AFFIDAVIT	Borehole will be Pre-Plugged? Yes No
The undersigned hereby affirms that the drilling, completion and eventual plugging if this well will comply with K.S.A. 55-101 et. seq.	
t is agreed that the following minimum requirements will be met:	
Notify the appropriate District office prior to spudding and again before plugging the	
and placement is necessary prior to plugging. In all cases, notify District Office prior	to any groung.
	to any grouing.
Notify appropriate District Office 48 hours prior to workover or re-entry.	to any grouing.
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For KCC Use ONLY	
API # 15	

IN ALL CASES, PLEASE FULLY COMPLETE THIS SIDE OF THE FORM.

In all cases, please fully complete this side of the form. Include items 1 through 3 at the bottom of this page.

Operator:						Loc	ation of We	ell: Count	v:				
Facility Name:										et from	N /	S Line	of Section
Borehole Number:											_	╗	
borenoie Number						Sec	D. ————		fee			U W Line	of Section W
						Is S	Section:	Regula	ar or	Irregular			
						If Section is Irregular, locate well from nearest corner boundary. Section corner used: NE NW SE SW					dary.		
				d electrica	tage to the	required b	1	as Surface	e Owner N				
	:		:		:			<i>y</i> 30 it.	•		ENID		
	:	:	:		:	:	:			LEG	END		
									0	Tank Pipeli Electr	Location Battery L ne Locat ric Line L e Road L	ion ocation	
			1	9		:	:		EXAMPL	E		:	
		•••••		••••								:	
			: 	••••	: 		:			9-7			1980' FSL
												:	

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.;

SEWARD CO. 3390' FEL

- 2. The distance of the proposed drilling location from the section's south / north and east / west; line.
- 3. The predicted locations of lease roads, tank batteries, pipelines, and electrical lines.

CORRECTION #1

KOLAR Document ID: 1806067

Form CDP-1 July 2014 Form must be Typed

OIL & GAS CONSERVATION DIVISION APPLICATION FOR SURFACE PIT

KANSAS CORPORATION COMMISSION

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 con-	structed:	Feet from North / South Line of Section			
Workover Pit Haul-Off Pit (If WP Supply API No. or Year Drilled)	Pit capacity:		Feet from East / West Line of Section			
(I W Cappy All TWO. of Total Difficult		(bbls)	County			
Is the pit located in a Sensitive Ground Water A	rea? Yes N	Ю	Chloride concentration: mg/l (For Emergency Pits and Settling Pits only)			
Is the bottom below ground level? Yes No	Artificial Liner?	0	How is the pit lined if a plastic liner is not used?			
Pit dimensions (all but working pits):	Length (feet	t)	Width (feet) N/A: Steel Pits			
Depth fro	om ground level to deep	pest point:	(feet) No Pit			
If the pit is lined give a brief description of the li material, thickness and installation procedure.			dures for periodic maintenance and determining 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 wellfeet		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 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 Num	ber:	Permi	t Date: Lease Inspection: Yes No			

CORRECTION #1

KOLAR Document ID: 1806067

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 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 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 1:					
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:	dic Protection Borehole Intent), you must supply the surface owners and 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. Act (see Chapter 55 of the Kansas Statutes Annotated), I have				
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	on 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.				
the KCC will be required to send this information to the surface	acknowledge that, because I have not provided this information, e owner(s). To mitigate the additional cost of the KCC performing 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 to form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1	fee with this form. If the fee is not received with this form, the KSONA-1 will be returned.				
Submitted Electronically					

Summary of Changes

API/Permit #: 15-195-23177-00-00

New Doc ID: 1806067
Parent Doc ID: 1773305
Correction Number: 1

Approved By: CeLena Peterson 12/09/2024

Field Name	Previous Value	New Value
Annular Space Grouted With	BentoniteCement	BentoniteClay
AnodeDepth_1	50	40
AnodeDepth_2	300	150
Aquifer Penetration	Multiple	Single
Well Number	1	Well #1
Cathodic Borehole Total Depth	300	150
Contractor License Number		35834
Contractor Name	Advise on ACO-1 Must be licensed by	Citation Drilling & Boring, LLC
Depth Of Base Backfill	KCC or KDHE 300	150
Expected Spud Date	5/20/2024	12/20/2024

Summary of changes for correction 1 continued

Field Name	Previous Value	New Value
KSONA Contact Email		mark.bredemeier@tallgr ass.com
KSONA Contact Person	Tanner Darnel	Mark Bredemeier
KSONA Contact Phone Number	8445848	269-7003
KCC Only - Approved By	CeLena Peterson 06/21/2024	CeLena Peterson 12/09/2024
KCC Only - Approved Date	06/21/2024	12/09/2024
KCC Only - Cathodic Surface Casing	170	20
Length Cathodic Surface Casing	170	20
Operator's Contact Name	Tanner Darnell	Mark Bredemeier
Operator's Phone	785-844-5848	785-269-7003
Operator's Street Address - line 2		145 N. Country Club Drive - Colby, KS 67701