

FOR KCC USE:

FORM CB-1 12/93

EFFECTIVE DATE: 7-2-06

FORM MUST BE TYPED

DISTRICT # 1

State of Kansas

FORM MUST BE SIGNED

SGA? Yes X No

CATHODIC PROTECTION BOREHOLE INTENT

ALL BLANKS MUST BE FILLED IN

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

Expected Spud (Starting) Date 05 15 2006
month day yearOPERATOR: License # 32119Name: Northern Natural GasAddress: 1420 17th RoadCity/State/Zip: Lyons, KS 67554Contact Person: Rick LoeschPhone: (402) 536-8005CONTRACTOR: License #: 6427Name: Darling Drilling - RosencrantzType Drilling Equipment: X Mud Rotary Cable
..... Air Rotary Other

CONSTRUCTION FEATURES

Length of Cathodic Surface (Non-Metallic) Casing 20' each hole ✓Planned to be set: 20' each hole ✓Length of Conductor pipe (if any?): 20' - 17.5" ft.Size of the borehole (I.D.): 100' - 10" inchesCathodic surface casing size: 10" inchesCathodic surface casing centralizers set at depths of: 20';

..... ; ; ; ; ; ; ; ; ; ;

Cathodic surface casing will terminate at:

X Above surface ... Surface Vault ... Below Surface VaultPitless casing adaptor will be used: Yes (X) at Depth ft.Anode installation depths are: 115' ; 105' ; 95' ; 85' ;75' ; 65' ; 55' ; 45' ; 35' ; 25' ; ; ; ;

* NO AQUIFER COMPLETION; SET PIPE 20' INTO BEDROCK;

* * MAX. Permitted Depth = 120'; AFFIDAVIT

The undersigned hereby affirms that the drilling, completion and eventual plugging of this well will comply with K.S.A. 55-101, et. seq. It is agreed that the following minimum requirements will be met:

1. Notify the appropriate district office prior to spudding of and again before plugging well;
2. A copy of the approved notice of intent to drill shall be posted on each drilling rig;
3. The minimum amount of cathodic surface casing as specified below shall be set by grouting to the top.
4. An agreement between the operator and the district office on plugs and placement is necessary prior to plugging;
5. The appropriate district office will be notified before well is either plugged or casing is grouted in;
6. IN ALL CASES, NOTIFY DISTRICT OFFICE PRIOR TO ANY CEMENTING.

I hereby certify that the statements made herein are true and to the best of my knowledge and belief.

Date: 04/11/06 Signature of Operator or Agent: Debbie anders Project Assistant

Mesa Corrosion Control

FOR KCC USE: <u>135-24521-0000</u>	
API # 15-	<u>ALTJ</u>
Conductor pipe required <u>NONE</u> feet	
Minimum cathodic surface casing required <u>20'</u> feet	
Approved by: <u>6427-06</u>	
This authorization expires: <u>12-27-06</u>	
(This authorization void if drilling not started within 6 months of effective date.)	
Spud date: _____	Agent: _____

REMEMBER TO:

- File Drill Pit Application (form CDP-1) with Intent to Install;
- File Completion Form CB-2 within 30 days of spud date;
- Notify appropriate district office 48 hours prior to workover or re-entry;
- Submit plugging report (CB-4) within 30 days after plugging is completed.

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202-1286.

Spot (Location) Q/Q/Q

SE. NE. SE. Sec. 35 Twp. 20 S, Rg. 21 X West1325 feet from South / North line of Section50 feet from East / West line of Section

(Circle directions from nearest outside corner boundaries)

IS SECTION X REGULAR IRREGULAR?

(Spot well on the Section Plate on Reverse Side)

County: NessLease Name: Holcomb Well #: M650-0Facility Name: Holcomb PipelineGround Surface Elevation: MSLCathodic Borehole Total Depth (1) holes @ 120' each ft. ✓Depth to Bedrock ft.

WATER INFORMATION:

Aquifer Penetration: X None Single MultipleDepth to bottom of fresh water: 200' ✓Depth to bottom of usable water: 550' ✓Water well within one-quarter mile: yes X no ✓Public water supply well within one mile: yes X no ✓

Water Source for Drilling Operations:

.... well farm pond stream X other ✓Water Well Location: DWR Permit #: Standard Dimension Ratio (SDR) is = 17.25 ✓

(cathodic surface OD csg. in inches / MWT in inches = SDR)

Annular space between borehole and casing will be grouted

with: X Concrete Bentonite Cement.... Neat cement Bentonite clayAnode vent pipe will be set at: ft. above surfaceAnode conductor (backfill) material TYPE: Loresco SC-2 ✓Depth to BASE of Backfill installation material: 120' ✓Depth to TOP of Backfill installation material: 25' ✓

RECEIVED
APR 17 2006
KCC WICHITA

35
20
2/14

IN ALL CASES PLOT THE INTENDED WELL ON THE PLAT BELOW

Show the relationship to other wells or facilities proposed to be serviced by the intended cathodic borehole. Please show all the wells, existing cathodic boreholes, pipelines or facilities within 1/2 mile of the proposed borehole.

API NO. 15- 135-24521-0000

OPERATOR Northern Natural Gas

LEASE Holcomb

WELL NUMBER M650-0

FACILITY NAME Holcomb Pipeline

LOCATION OF WELL: COUNTY Ness

1325 feet from south north line of section

50 feet from east west line of section

SECTION 35 TWP 20S RG 21W

SPOT: QTR/QTR/QTR/QTR OF ACREAGE
SE - NE - SE -

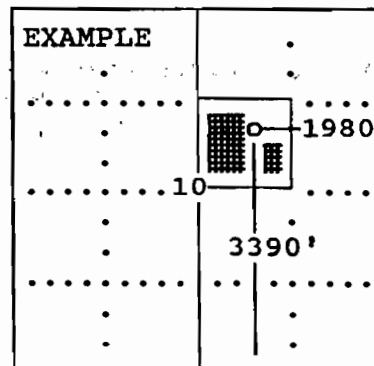
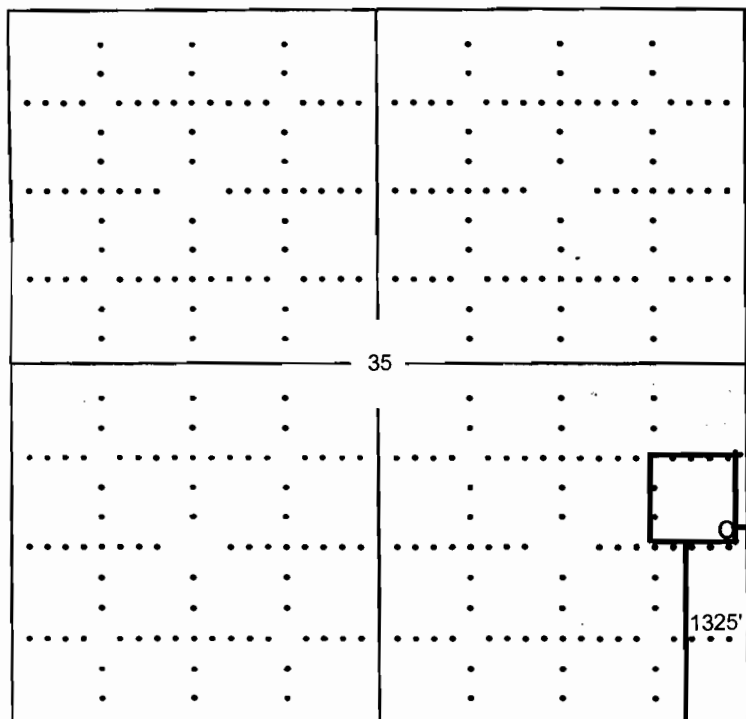
IS SECTION X REGULAR or IRREGULAR
IF SECTION IS IRREGULAR, LOCATE WELL FROM NEAREST CORNER BOUNDARY.

Section corner used: NE NW SE SW

PLAT

(Show location of intended cathodic borehole.)

(Show footage from nearest lease, unit or outside section boundary line.)



SEWARD CO.

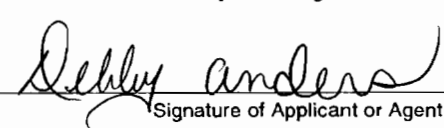
In plotting the proposed location of the well, you must show:

- 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 section's south/north and east/west; and
- 3) the distance to the nearest lease, unit or outside section boundary line.

**KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
APPLICATION FOR SURFACE POND**

Form CDP-1
January 2001
Form must be Typed

Submit in Duplicate

Operator Name: Northern Natural Gas		License Number: 32119
Operator Address: 1420 17th Road Lyons, KS 67554		
Contact Person: Rick Loesch		Phone Number: (402) 536-8005
Lease Name: Holcomb M650-0		Pit Location:
Type of Pond: ___ Emergency Pit ___ Treatment Pit ___ Workover Pit <u>X</u> Drilling Pit ___ Burn Pit (If WP Supply API No. or Year Drilled)	Pit is: <u>X</u> Proposed ___ Existing If Existing, date constructed: _____ Pit capacity: _____ (bbls)	SE Qtr. Sec. 35 Twp. 20S R. 21 ☐ E ☒ W 1325 Feet from N ☒ (circle one) Line of Section 50 Feet from ☒ W ☒ (circle one) Line of Section Ness County
Is the pit located in a Sensitive Ground Water Area? ☐ Yes ☒ No		Chloride concentration: _____ mg/l (For Emergency Pits and Treatment 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?
Pit dimensions (all but working pits): 15 Length (feet) 6 Width (feet) Depth from ground level to deepest point: 6 (feet)		
If the pit is lined give a brief description of the liner material, thickness and installation procedure. <u>6M Clear plastic liner, layed in pit</u> <u>and edges secured to pit</u>		Describe procedures for periodic maintenance and determining liner integrity, including any special monitoring. <u>Pit will only be used for 3-4 day period.</u>
Distance to nearest water well within one-mile of pit <u>2795</u> feet Depth of water well <u>56</u> feet	Depth to shallowest fresh water <u>15</u> feet. Source of information: <u>KH K&S</u> ☒ ___ measured ___ well owner ___ electric log ___ KDWR	
Emergency, Treatment 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 pond? ☐ Yes ☐ No	Drilling and Workover Pits ONLY: Type of material utilized in drilling/workover: _____ Number of working pits to be utilized: <u>1</u> Abandonment procedure: <u>Fluids will be pumped out and liner folded and backfilled.</u> Drill pits must be closed within 365 days of spud date.	
I hereby certify that the above statements are true and correct to the best of my knowledge and belief. <u>04/11/06</u> Date  Signature of Applicant or Agent RECEIVED APR 17 2005 KCC WICHITA		

KCC OFFICE USE ONLY

Date Received: 4/17/06 Permit Number: _____ Permit Date: 4/17/06 Lease Inspection: ☐ Yes ☒ No

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

15-135-24581-0000