For KCC Use:	10-11-06
Effective Date:	10 11-00
District #	
SGA? Yes	′ <mark>∕</mark> No

# Kansas Corporation Commission Oil & Gas Conservation Division

# **NOTICE OF INTENT TO DRILL**

Form C-1
December 2002
Form must be Typed
Form must be Signed
All blanks must be Filled

Must be approved by KCC five (5) days prior to commencing well

OPERATOR: License# 5135 Name: John O. Farmer, Inc.	day year	Spot
Name- John O. Farmer, Inc.		· · · · · · · · · · · · · · · · · · ·
Name- John O. Farmer, Inc.		
Name:		1700 feet from VE / W Line of Section
Address: PO Box 352		Is SECTION RegularIrregular?
City/State/Zip: Russell, KS 67665		(Note: Locate well on the Section Plat on reverse side)
Contact Person: John Farmer IV		County: Graham
Phone: 785-483-3144		Lease Name: DeYoung Well #: 1
		Field Name: Cooper
CONTRACTOR: License# 33575		Is this a Prorated / Spaced Field?
Name: WW Drilling, LLC		Target Formation(s): LKC, Arbuckle
Well Drilled For: Well C	lass: Type Equipmen	Nearest Lease or unit boundary: 880'
		Ground Surface Elevation: 2250' EGL feet MSL
		Water well within one-quarter mile:
	ool Ext. Air Rotary	Public water supply well within one mile:
	Pither	Depth to bottom of fresh water:
Other_	THE CONTRACTOR OF THE CONTRACT	Depth to bottom of usable water: 980'
Other		Surface Pipe by Alternate: 1 2
If OWWO: old well information as follow	ws:	Length of Surface Pipe Planned to be set: 200'
Operator:		Length of Conductor Pipe required: none
Weil Name:		Projected Total Depth: 3850'
Original Completion Date:	Original Total Depth:	Formation at Total Depth; Arbuckle
Directional, Deviated or Horizontal wellt	hore?	Water Source for Drilling Operations:
If Yes, true vertical depth:		- Constant C
Bottom Hole Location:		DWR Permit #:
KCC DKT #:		(Note: Apply for Permit with DWR )
NOO DAT #.		—— Will Cores be taken? Yes ✓ No
		If Yes, proposed zone:
		AFFIDAVIT
The undersigned hereby affirms that the	he drilling, completion and e	ntual plugging of this well will comply with K.S.A. 55 et. seq.
It is agreed that the following minimum	n requirements will be met:	
1. Notify the appropriate district off	fice <i>prior</i> to spudding of we	
2. A copy of the approved notice o		on each drilling rig;
		I be set by circulating cement to the top; in all cases surface pipe shall be set
through all unconsolidated mate	•	, ,
• •		d the district office on plug length and placement is necessary prior to plugging; er plugged or production casing is cemented in;
		cemented from below any usable water to surface within 120 days of spud date.
		order #133,891-C, which applies to the KCC District 3 area, alternate II cementing
		I shall be plugged. In all cases, NOTIFY district office prior to any cementing.
I hereby certify that the statements ma	ade herein are true and to t	best of my knowledge and belief.
Date: 10/3/2006 Signature		ttle: Geologist
Date: 15/5/2000 Signature	e of Operator or Agent:	Inte: Secondary
		──/ Remember to:
For KCC Use ONLY	2-0000	File Drill Pit Application (form CDP-1) with Intent to Drill;
API # 15 . 065-2323		File Completion Form ACO-1 within 120 days of spud date;
Conductor pipe required NC	200 feet per Alt.	File acreage attribution plat according to field proration orders;     Notify appropriate district office 48 hours prior to workover or re-entry;
Minimum surface pipe required	200 feet per Alt.	Submit plugging report (CP-4) after plugging is completed;
Approved by: 10- 6-06		Obtain welling and the form discussion on injuries and water
. 4/2-0	7	Obtain withen approval before disposing or injecting sait water.      If this permit has expired (See: authorized expiration date) please
This authorization expires: 7-0-0 (This authorization void if drilling not star		check the box helow and return to the address helow
, asinci zanon voia a drining not star	.cc o montas di appiova	Well Not Drilled - Permit Expired Signature of Operator or Agent:
		· · · · · · · · · · · · · · · · · · ·
Spud date: Agen	nt:	Signature of Operator or Agent:
Spud date: Ager	nt:	Signature of Operator or Agent:

## IN ALL CASES PLOT THE INTENDED WELL ON THE PLAT BELOW

Plat of acreage attributable to a well in a prorated or spaced field

If the intended well is in a prorated or spaced field, please fully complete this side of the form. If the intended well is in a prorated or spaced field complete the plat below showing that the well will be properly located in relationship to other wells producing from the common source of supply. Please show all the wells and within 1 mile of the boundaries of the proposed acreage attribution unit for gas wells and within 1/2 mile of the boundaries of the proposed acreage attribution unit for oil wells.

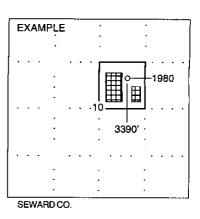
API No. 15 - 065-23233-000	Location of Well: County: Graham
Operator: John O. Farmer, Inc.	
Lease: DeYoung	feet from N / ✓ S Line of Section  1700 feet from ✓ E / W Line of Section
Well Number: 1	Sec. 11 Twp. 10 S. R. 21 ☐ East ✓ Wes
Field: Cooper	
Number of Acres attributable to well:	Is Section: ✓ Regular or ☐ Irregular
QTR / QTR / QTR of acreage: NE SW SE	If Section is Irregular, locate well from nearest corner boundary.  Section corner used: NE NW SE SW

#### **PLAT**

(Show location of the well and shade attributable acreage for prorated or spaced wells.)

(Show footage to the nearest lease or unit boundary line.)

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NOTE: in all cases locate the spot of the proposed drilling locaton.

### in plotting the proposed location of the well, you must show:

- 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.
- 3. The distance to the nearest lease or unit boundary line.
- 4. If proposed location is located within a prorated or spaced field a certificate of acreage attribution plat must be attached: (CG-R for Gas wells).

OCT - 5 2006

# Kansas Corporation Commission Oil & Gas Conservation Division

Form CDP-1 April 2004 Form must be Typed

## **APPLICATION FOR SURFACE PIT**

Submit in Duplicate

Operator Name: John O. Farmer, Inc.			License Number: 5135	
Operator Address: PO Box 352	Russell, K	S 67665		
Contact Person: John Farmer IV			Phone Number: ( 785 ) 483 - 3144	
Lease Name & Well No.: DeYoung #1		Pit Location (QQQQ):		
Type of Pit:	Pit is:		<u>Sh. NE. SW. SE</u>	
Emergency Pit Burn Pit	✓ Proposed   Existing		Sec. 11 Twp. 10S R. 21 ☐ East ✓ West	
Settling Pit	If Existing, date constructed:		880' Feet from North / South Line of Section	
☐ Workover Pit ☐ Haul-Off Pit			1700' Feet from 🗸 East / West Line of Section	
(If WP Supply API No. or Year Drilled)	Pit capacity: 3,000	/h.h.l.s.\	Graham	
		(bbls)	County	
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?	Artificial Liner?		How is the pit lined if a plastic liner is not used?	
✓ Yes  No	☐ Yes 🗸	No	native clay and drilling mud	
Pit dimensions (all but working pits): 6	5 Length (fe	et)65	Width (feet) N/A: Steel Pits	
Depth fro	om ground level to de	epest point:	5 (feet)	
If the pit is lined give a brief description of the material, thickness and installation procedure			dures for periodic maintenance and determining nocluding any special monitoring.	
Distance to nearest water well within one-mile of pit APA Depth to Source of		Depth to shallo Source of infor	west fresh waterfeet. // // // // // // // // // // // // //	
feet Depth of water well	feet	measu	redwell owner electric logKDWR	
Emergency, Settling and Burn Pits ONLY:		Drilling, Work	over and Haul-Off Pits ONLY:	
Producing Formation:		Type of materia	ype of material utilized in drilling/workover: drilling mud	
Number of producing wells on lease:			Number of working pits to be utilized: 3	
Barrels of fluid produced daily: Abandonme		Abandonment j	procedure: allow to dry by evaporation and	
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.  orrect to the best of my knowledge and belief.		
I hereby certify that the above state	ments are true and c	orrect to the best	of my∕knowledge and belief.	
10/3/2006				
	ксс с	OFFICE USE ON	u(Y)	
Date Received: 10/0/04 Permit Number: Permit Date: 10/0/04 Lease Inspection: Yes No				

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

RECEIVED

OCT - 5 300E

KCC WICHITA