For KCC Use: Effective Date: \_ SGA? Yes X No

# KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

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

# NOTICE OF INTENT TO DRILL

October 16, 2006	_
Expected Spud Date October 16, 2006	Spot
	NESW - SW - NE SW Sec. 13 Twp. 31 S. R. 21 West
OPERATOR: License# 32711	1720 feet from N / S Line of Section
<sub>Name</sub> . Mike Becker	leer nom F / V Eme of Section
Address: 15135 Broadmoor	Is SECTION Regular Irregular?
City/State/Zip: Stanley, KS 66223	(Note: Locate well on the Section Plat on reverse side)
Contact Person: Mike Becker	County: Crawford
Phone: 913-271-5179	Lease Name: Johnston Well #: 1
32711	Field Name: Unknown
CONTRACTOR: License# 32711	Is this a Prorated / Spaced Field?
Name:	Target Formation(s): Bartlesville
Well Drilled For: Well Class: Type Equipment:	Nearest Lease or unit boundary: 6 miles north
	Ground Surface Elevation: 870 ' feet MSL
Gas Storage Pool Ext. Air Rotary	Water well within one-quarter mile:Yes ✓ No
OWO Disposal Villdcat Cable	Public water supply well within one mile:
Seismic;# of Holes Other	Depth to bottom of fresh water: 120 feet
Other	Depth to bottom of usable water: 1000 feet
Offici	Surface Pipe by Alternate: 1 2 2
f OWWO: old well information as follows:	Length of Surface Pipe Planned to be set: 20 feet
Operator:	Length of Conductor Pipe required: n/a
Well Name:	Projected Total Depth: 300 feet  Formation at Total Depth: Bartlesville
Original Completion Date:Original Total Depth:	1 Official of the Control of the Con
Directional, Deviated or Horizontal wellbore?	Water Source for Drilling Operations:  Well Farm Pond Other Water tank
Directional, Deviated or Horizontal wellbore?	
If Yes, true vertical depth:	DWR Permit #:
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If Yes, true vertical depth:  Bottom Hole Location:  KCC DKT #:  AFF  The undersigned hereby affirms that the drilling, completion and eventual p  It is agreed that the following minimum requirements will be met:	DWR Permit #:
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# 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.

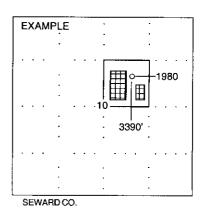
API No. 15 - 037-21860-0000	Location of Well: County: Crawford		
Operator: Mike Becker  Lease: Johnston  Well Number: 1  Field: Unknown	feet from N / S Line of Section  1815 feet from E / W Line of Section  Sec. 13 Twp. 31 S. R. 21  Feet from E / W Line of Section  Sec. 13 Twp. 31 S. R. 21		
Number of Acres attributable to well: 160	Is Section: ✓ Regular or ☐ Irregular		
QTR / QTR / QTR of acreage: SW - SW - NE SW	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:

- 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.

RECEIVED

- 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: (C0-7 No. 1011) 2006 CG-8 for gas wells).

KCC WICHITA

# 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: Mike Becker		License Number: 32711			
Operator Address: 15135 Broa	admoor, S	tanley, k	S 66223		
Contact Person: Mike Becker			Phone Number: (913)271 - 5	179	
Lease Name & Well No.: Johnston #1		•	Pit Location (QQQQ):		
Type of Pit:	Pit is:		SW. NE . SW		
Emergency Pit Burn Pit	Proposed Existing		Sec. 13 Twp. 31 R. 21	East West	
Settling Pit	If Existing, date constructed:		1720 Feet from North / 🗸	South Line of Section	
Workover Pit Haul-Off Pit	Pit capacity:		1815 Feet from	West Line of Section	
(If WP Supply API No. or Year Drilled)	000	(bbls)	Crawford	County	
Is the pit located in a Sensitive Ground Water	· Area? ☐ Yes 🔽	4 No	Chloride concentration:	mg/l	
le the better below around love 2	Artificial Liner?		(For Emergency Pits and Settlin		
Is the bottom below ground level?  Yes No	Yes 🗸	No	How is the pit lined if a plastic liner is not Clay	useur	
Pit dimensions (all but working pits): 25	feet Langeth (6	ant) 8 feet		M/A: Stool Dite	
	rom ground level to de			N/A. Steel Fits	
If the pit is lined give a brief description of the		T	edures for periodic maintenance and determ	mining	
, , , , , , , , , , , , , , , , , , , ,			ncluding any special monitoring.		
N/A		N/A			
		36,000	120		
Distance to nearest water well within one-mile of pit  Depth to sh Source of ii		Depth to shallo Source of info	l.		
N/A feet / Depth of water wellfeet		measu	ured well owner electric lo	g KDWR	
Emergency, Settling and Burn Pits ONLY: Drilling, Woo		Drilling, Work	Workover and Haul-Off Pits ONLY:		
		1	al utilized in drilling/workover: Water		
		Done to a constant of the control of			
Barrels of fluid produced daily: Abandonmen		procedure: Drain water, fill back in	with dirt		
Does the slope from the tank battery allow all spilled fluids to flow into the pit? Yes No Drill p			Abandonment procedure: Drain Water, Till Dack in With dift  Drill pits must be closed within 365 days of spud date.  Driect to the best of my knowledge and belief.		
I hereby certify that the above stat	ements are true and	correct to the bes	t of my knowledge and belief.	3	
10-9-06 Date		m.l.	Beel Signature of Applicant or Agent	RECEIVE	
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Date Received: /O/R/OF Permit Num	nber:	Perm	iit Date: it Date: ಸರ್ (ಬೆ\೧್ಫ Lease Inspection	<sub>℩</sub> ၙ℟℄℄℄℟℟℄℄	