# For KCC Use: Effective Date: 5-17-2009 District #

# KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form C-1
October 2007
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	
Expected Spud Date: 4-4-2009 month day year	Spot Description: NW SE SW . Sec. 35 Twp. 29 S. R. 12 XE	 ]w
OPERATOR: License# 32967 /	feet from N / X S Line of Sect	tion
Name: Leslie Wolfe Address 1: 208 Stephens Street	Is SECTION: Regular Irregular?	lion
Address 2:	(Note: Locate well on the Section Plat on reverse side)	
City: Peru State: ks Zip: 67360 +	County: Elk	
Contact Person: Leslie Wolfe Phone: 620-330-3382	Lease Name: Thomas Well #: 1	
	Field Name: Bueby Long ton North	
CONTRACTOR: License# Unknown Must be licensed by KCC Name: Advise on ACO-1	Is this a Prorated / Spaced Field?  Target Formation(s): Layton	No
Well Drilled For: Well Class: Type Equipment:	Nearest Lease or unit boundary line (in footage): 165	
XOil	Ground Surface Elevation: 1078 est feet M	
Gas Storage Pool Ext. Air Rotary	Water well within one-quarter mile:  Public water supply well within one mile:  Yes X	_
Disposal Wildcat Cable	Public water supply well within one mile:  Depth to bottom of fresh water: 259 /50	NO
Seismic ; # of Holes Other Other:	Depth to bottom of usable water:	
Otrer.	Surface Pipe by Alternate:	
If OWWO: old well information as follows:	Length of Surface Pipe Planned to be set: 40	
Operator: NA	Length of Conductor Pipe (if any): NONE	
Well Name: NA	Projected Total Depth: 1000	
Original Completion Date: NA Original Total Depth: NA	Formation at Total Depth: 988 Layton	
	Water Source for Drilling Operations:	
Directional, Deviated or Horizontal wellbore?  If Yes, true vertical depth: NA	Well Farm Pond Other:	
Bottom Hole Location: NA	DWR Permit #: NA (Note: Apply for Permit with DWR	
KCC DKT #: NA	Will Cores be taken?	No
	If Yes, proposed zone: NA	.,,
	KANSAS CORPORATION COMM	11SS10
AFF	IDAVIT	
The undersigned hereby affirms that the drilling, completion and eventual plug	gging of this well will comply with K.S.A. 55 et. seq. MAY 1 1 2009	1
It is agreed that the following minimum requirements will be met:		
1. Notify the appropriate district office <i>prior</i> to spudding of well;	RECEIVEI	D
2. A copy of the approved notice of intent to drill shall be posted on each	drilling rig;	_
<ol> <li>The minimum amount of surface pipe as specified below shall be set through all unconsolidated materials plus a minimum of 20 feet into the</li> <li>If the well is dry hole, an agreement between the operator and the distr</li> </ol>	underlying formation.	
5. The appropriate district office will be notified before well is either plugge	ed or production casing is cemented in;	
6. If an ALTERNATE II COMPLETION, production pipe shall be cemented		
Or pursuant to Appendix "B" - Eastern Kansas surface casing order #13 must be completed within 30 days of the spud date or the well shall be	33,891-C, which applies to the KCC District 3 area, alternate II cementing	
I hereby certify that the statements made herein are true and correct to the	st of my kijowledge and belief.	
Date: 4-4-2009 Signature of Operator or Agent:	Owner Title:	
	Remember to:	35
For KCC Use ONLY	- File Drill Pit Application (form CDP-1) with Intent to Drill;	S
API # 15 - 049-22533-00-00	- File Completion Form ACO-1 within 120 days of spud date;	 
Conductor pipe required None feet	<ul> <li>File acreage attribution plat according to field proration orders;</li> </ul>	29
Minimum surface pipe required 40 feet per ALT.	<ul> <li>Notify appropriate district office 48 hours prior to workover or re-entry;</li> <li>Submit plugging report (CP-4) after plugging is completed (within 60 days);</li> </ul>	
Approved by: full 5-12-2009	<ul> <li>Submit plugging report (CP-4) after plugging is completed (within 60 days),</li> <li>Obtain written approval before disposing or injecting salt water.</li> </ul>	12
\$ 7772018 1	- If this permit has expired (See: authorized expiration date) please	-
This authorization expires: (This authorization void if drilling not started within 12 months of approval date.)	check the box below and return to the address below.	X
	Well Not Drilled - Permit Expired Date:	
Spud date: Agent:	Signature of Operator or Agent:	ليا

#### 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.

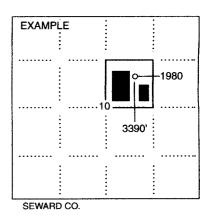
API No. 15 - 049-22533-00-00	
Operator: Leslie Wolfe	Location of Well: County: Elk
Lease: Thomas	1,155 feet from N / N S Line of Section
Well Number:	1,155 feet from N / X S Line of Section  825 feet from E / X W Line of Section
Field: Busby	Sec. 35 Twp. 29 S. R. 12 E W
Number of Acres attributable to well:  QTR/QTR/QTR/QTR of acreage:  NE - SW - S	Is Section: Regular or Irregular
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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KANSAS CORPORATION COMMISSION

MAY 1 1 2009 RECEIVED



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 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).

# 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: Leslie Wolfe		License Number: 32967			
Operator Address: 208 Stephens S	street Peru K	ansas 673	60		
Contact Person: Leslie Wolfe		Phone Number: 620-330-3382			
Lease Name & Well No.: Thomas #1		Pit Location (QQQQ):			
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 If Existing, date on NA Pit capacity: 350	Existing onstructed: (bbls)		East / Kest Line of Section  County	
Is the pit located in a Sensitive Ground Water  Is the bottom below ground level?  Yes X No	Artificial Liner?	No No	Chloride concentration:  (For Emergency Pits  How is the pit lined if a plastic lined if a plastic lined if a plastic lined li	s and Settling Pits only)	
Pit dimensions (all but working pits):    Column					
, , , , , , , , , , , , , , , , , , ,		SHORT TE	ncluding any special monitoring.		
Source		Source of infor	Depth to shallowest fresh water 84 feet. Source of information:  measured well owner electric log KDWR  Drilling, Workover and Haul-Off Pits ONLY:		
		orkover and Haul-Off Pits ONLY:			
Producing Formation: NA Type of materi		f material utilized in drilling/workover: FRESH WATER			
		per of working pits to be utilized:			
Barrels of fluid produced daily: 0		Abandonment	procedure: EVAPORATE W	ATER AND BACKFILL   8	
Does the slope from the tank battery allow all spilled fluids to flow into the pit? Yes No		Drill pits must	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. KANSAS CORPORATION COMMISSION  4-4-2009  Date  Signature of Applicant or Agent RECEIVED					
Date Received: 5/11/05 Permit Num		OFFICE USE O	=11	RFAC RFAS No	