For KCC Use: フ-フ-2009 Effective Date: 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: July 7, 2009 month day year OPERATOR: License# Name: Schankie Well Service, Inc.	Spot Description: N2 SW SW Sec. 22 Twp. 23 S. R. 11 XE W (0/0/0/0/0) 530 feet from N / X S Line of Section 4,950 feet from E / W Line of Section
Address 1: P.O. Box 397	ls SECTION: 🔀 Regular 🔲 Irregular?
Address 2:	(Note: Locate well on the Section Plat on reverse side)
City: Madison State: KS Zip: 66860 +	County: Greenwood
Contact Person: Cliff Schankie Phone: (620 437-2595	Lease Name: Carver Well #: 4
./	Field Name: Seeley-Wick
CONTRACTOR: License#30567	Is this a Prorated / Spaced Field?
Name: Rig 6 Drilling Company	Target Formation(s): Bartlesville
Well Drilled For: Well Class: Type Equipment:	Nearest Lease or unit boundary line (in footage): 330'
XOii / Enh Rec XInfield / XMud Rotary	Ground Surface Elevation: n/a feet MSL
Gas Storage Pool Ext. Air Rotary	Water well within one-quarter mile: Public water supply well within one mile: Yes No
Disposal Wildcat Cable	1,7
Seismic ;# of HolesOther	Depth to bottom of fresh water: 50" Depth to bottom of usable water: 50"
Other:	Surface Pipe by Alternate:
If OWWO: old well information as follows:	Length of Surface Pipe Planned to be set: 40'
	Length of Conductor Pipe (if any):
Operator:	Projected Total Depth: 2,100'
Well Name:Original Total Depth:	Formation at Total Depth: Bartlesville
Directional, Deviated or Horizontal wellbore?	Water Source for Drilling Operations: Well Farm Pond Other:
If Yes, true vertical depth:	DWR Permit #:
Bottom Hole Location:	(Note: Apply for Permit with DWR
KCC DKT #:	Will Cores be taken?
	If Yes, proposed zone:
AFF	RECEIVED
The undersigned hereby affirms that the drilling, completion and eventual plug	
	JUL @ 2 2009
It is agreed that the following minimum requirements will be met:	
 If the well is dry hole, an agreement between the operator and the district. The appropriate district office will be notified before well is either plugger. If an ALTERNATE II COMPLETION, production pipe shall be cemented. Or pursuant to Appendix "B" - Eastern Kansas surface casing order #1: must be completed within 30 days of the spud date or the well shall be 	by circulating cement to the top; in all cases surface pipe shall be set (1) If the enderlying formation. First office on plug length and placement is necessary prior to plugging; ed or production casing is cemented in; if from below any usable water to surface within 120 DAYS of spud date. 33,891-C, which applies to the KCC District 3 area, alternate II cementing plugged. In all cases, NOTIFY district office prior to any cementing.
I hereby certify that the statements made herein are true and correct to the but	
Date: July 2, 2009 Signature of Operator or Agent: Land	ra Thanka Title: Agent
•	Remember to:
For KCC Use ONLY	- File Drill Pit Application (form CDP-1) with Intent to Drill;
API # 15 . 073-24112 -0000	- File Completion Form ACO-1 within 120 days of spud date;
Conductor pipe required / York feet	- File acreage attribution plat according to field proration orders;
Minimum surface pipe required 40 feet per ALT. I	 Notify appropriate district office 48 hours prior to workover or re-entry; Submit plugging report (CP-4) after plugging is completed (within 60 days);
Approved by: Lung 7-2-2009	- Obtain written approval before disposing or injecting salt water.
This authorization expires: 7-2-2010	- If this permit has expired (See: authorized expiration date) please
(This authorization void if drilling not started within 12 months of approval date.)	check the box below and return to the address below.
(7) data of tallers to be a daming the country	check the box below and return to the address below.
Spud date:Agent:	Check the box below and return to the address below. Well Not Drilled - Permit Expired Date:

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.

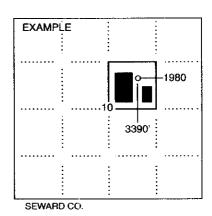
API No. 15 - 073-241/2-00-00	
Operator: Schankie Well Service, Inc.	Location of Well: County: Greenwood
Lease: Carver	
Weil Number: 4	4,950 feet from X E / W Line of Section
Field: Seeley-Wick	Sec. 22 Twp. 23 S. R. 11 🔀 E 🗌 W
Number of Acres attributable to well:	Is Section: Regular or Irregular
QTR/QTR/QTR/QTR of acreage: N2 - SW - SW - 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 south / north and east / west outside section lines.
- 3. The distance to the nearest lease or unit boundary line (in footage).
- 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: Schankie Well Service, Inc.			License Number: 6470				
Operator Address: P.O. Box 397			Madison KS 66860				
Contact Person: Cliff Schankie			Phone Number: (620 437-2595				
Lease Name & Well No.: Carver	4		Pit Location (QQQQ):				
Type of Pit:	Pit is:		N2 SW SW SW				
Emergency Pit Burn Pit	Proposed	Existing	Sec. 22 Twp. 23 R. 11 East West				
Settling Pit Driffing Pit	If Existing, date or	onstructed:	530 Feet from North / South Line of Section				
Workover Pit Haul-Off Pit	Pit capacity:		4,950 Feet from East / West Line of Section				
(If WP Supply API No. or Year Drilled)	350	(bbls)	Greenwood 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?	No	How is the pit lined if a plastic liner is not used?				
Yes No	Yes X		native clay				
Pit dimensions (all but working pits):	iO Length (fe	et)	Width (feet) N/A: Steel Pits				
Depth fr	om ground level to de	eepest point:	6 (feet) No Pit				
If the pit is lined give a brief description of the liner material, thickness and installation procedure. Describe procedures for periodic maintenance and determining liner integrity, including any special monitoring.							
			RECEIVED				
			JUL 0 2 20				
			CC MOLU				
-10101110 10 110 110 110 110 110 110 110		Depth to shallo Source of info	west fresh waterfeet.				
n/a / feet Depth of water wellfeet		measu	<u> </u>				
Emergency, Settling and Burn Pits ONLY:		1 -	over and Haul-Off Pits ONLY:				
Producing Formation: Typ		Type of materi	al utilized in drilling/workover: Drilling Mud				
Number of producing wells on lease: Num			king pits to be utilized: 2				
Barrels of fluid produced daily: Abandonme			procedure: Let air dry and backfill				
Does the slope from the tank battery allow all spilled fluids to flow into the pit? Yes No Drill pits must		Drill pits must	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.							
			1				
July 2, 2009 Date Signature of Applicant or Agent							
Date Signature of Applicant or Agent							
KCC OFFICE USE ONLY Steel Pit RFAC RFAS							
Date Received: $\frac{7/g/o9}{}$ Permit Num	nber:	Perm	nit Date: 7/2/09 Lease Inspection: Yes XNo				