

For KCC Use: 7-15-2009
Effective Date: 4
District # 4
SGA? ☐ Yes ☒ No

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

NOTICE OF INTENT TO DRILL

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

Form C-1
October 2007
Form must be Typed
Form must be Signed
All blanks must be Filled

Expected Spud Date: July 25 2009
month day year

OPERATOR: License# 33786
Name: Double "D",s LLC
Address 1: 133 East 12th st
Address 2: _____
City: Hays State: Ks Zip: 67601 + _____
Contact Person: Duane Bieker
Phone: 785-230-0113
CONTRACTOR: License# 32951
Name: Renegade Well Ser.

Well Drilled For: ☒ Oil ☐ Gas ☐ Enh Rec ☐ Storage ☐ Disposal ☐ Seismic; # of Holes _____ ☐ Other: _____
Well Class: ☒ Infield ☐ Pool Ext. ☐ Wildcat ☒ Other: _____
Type Equipment: ☐ Mud Rotary ☐ Air Rotary ☒ Cable

☒ If OWWO: old well information as follows:

Operator: Rains & Williams Oil Co.
Well Name: North #5
Original Completion Date: 5/20/66 Original Total Depth: 3990'
9/15/66

Directional, Deviated or Horizontal wellbore? ☐ Yes ☒ No
If Yes, true vertical depth: _____
Bottom Hole Location: _____
KCC DKT #: _____

Spot Description: se 1/4 - se - ne - sw Sec. 28 Twp. 15 S. R. 20 ☐ E ☒ W
(00000) 1,650 feet from SE Line of Section
2,970 feet from E Line of Section

Is SECTION: ☒ Regular ☐ Irregular?

(Note: Locate well on the Section Plat on reverse side)

County: Ellis
Lease Name: North Well #: 5
Field Name: Wallace
Is this a Prorated / Spaced Field? ☐ Yes ☒ No
Target Formation(s): Cong/sand

Nearest Lease or unit boundary line (in footage): Must be 2,330'
Ground Surface Elevation: 2299 feet MSL
Water well within one-quarter mile: ☒ Yes ☐ No
Public water supply well within one mile: ☐ Yes ☒ No
Depth to bottom of fresh water: 140'
Depth to bottom of usable water: 600' 700'
Surface Pipe by Alternate: ☐ I ☒ II 239'
Length of Surface Pipe Planned to be set: 200' already set
Length of Conductor Pipe (if any): _____
Projected Total Depth: 3990'
Formation at Total Depth: Conglomerate

Water Source for Drilling Operations:
☐ Well ☐ Farm Pond ☒ Other: lease water
DWR Permit #: _____

(Note: Apply for Permit with DWR ☐)

Will Cores be taken? ☐ Yes ☒ No
If Yes, proposed zone: _____

AFFIDAVIT

KANSAS CORPORATION COMMISSION

The undersigned hereby affirms that the drilling, completion and eventual plugging of this well will comply with K.S.A. 55 et. seq.

It is agreed that the following minimum requirements will be met:

1. Notify the appropriate district office **prior** to spudding of well;
2. A copy of the approved notice of intent to drill **shall be** posted on each drilling rig;
3. The minimum amount of surface pipe as specified below **shall be set** by circulating cement to the top; in all cases surface pipe **shall be set** through all unconsolidated materials plus a minimum of 20 feet into the underlying formation.
4. If the well is dry hole, an agreement between the operator and the district office on plug length and placement is necessary **prior to plugging**;
5. The appropriate district office will be notified before well is either plugged or production casing is cemented in;
6. If an ALTERNATE II COMPLETION, production pipe shall be cemented from below any usable water to surface within **120 DAYS** of spud date.
Or pursuant to Appendix "B" - Eastern Kansas surface casing order #133,891-C, which applies to the KCC District 3 area, alternate II cementing must be completed within 30 days of the spud date or the well shall be 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 best of my knowledge and belief.

Date: 7/9/2009 Signature of Operator or Agent: Duane Bieker Title: partner

JUL 10 2009

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For KCC Use ONLY

API # 15 - 051-30358-00-01
Conductor pipe required None feet
Minimum surface pipe required 239 feet per ALT. ☐ I ☒ II
Approved by: June 7-10-2009
This authorization expires: 7-10-2010
(This authorization void if drilling not started within 12 months of approval date.)
Spud date: _____ Agent: _____

Remember to:

- File Drill Pit Application (form CDP-1) with Intent to Drill;
- File Completion Form ACO-1 within 120 days of spud date;
- File acreage attribution plat according to field proration orders;
- Notify appropriate district office 48 hours prior to workover or re-entry;
- Submit plugging report (CP-4) after plugging is completed (within 60 days);
- Obtain written approval before disposing or injecting salt water.
- If this permit has expired (See: authorized expiration date) please check the box below and return to the address below.

☐ Well Not Drilled - Permit Expired Date: _____
Signature of Operator or Agent: _____

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

28 15 20 ☐ E ☒ W

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 - 051-30358-00 01
 Operator: Double "D",s LLC
 Lease: North
 Well Number: 5
 Field: Wallace

Number of Acres attributable to well: _____
 QTR/QTR/QTR/QTR of acreage: se 1/4 - se - ne - sw

Location of Well: County: Ellis
1,650 feet from ☒ S Line of Section
2,970 feet from ☒ E Line of Section
 Sec. 28 Twp. 15 S. R. 20 ☐ E ☒ W

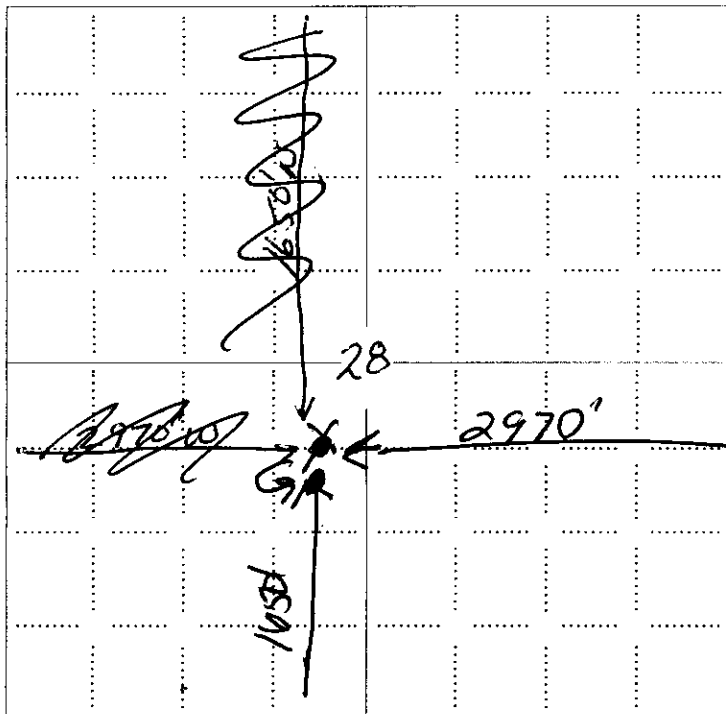
Is Section: ☒ Regular or ☐ Irregular

If Section is Irregular, locate well from nearest corner boundary.

Section corner used: ☐ NE ☐ NW ☐ SE ☐ SW

PLAT

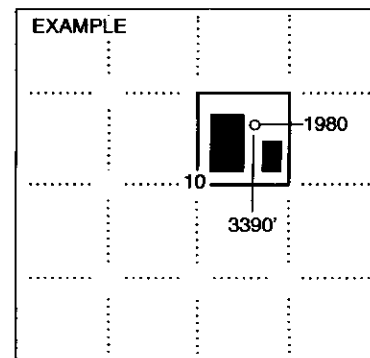
(Show location of the well and shade attributable acreage for prorated or spaced wells.)
 (Show footage to the nearest lease or unit boundary line.)

ELLIS CT

KANSAS CORPORATION COMMISSION

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SEWARD CO.

NOTE: In all cases locate the spot of the proposed drilling location.

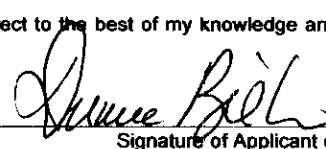
In plotting the proposed location of the well, you must show:

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: (CO-7 for oil wells; CG-8 for gas wells).

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

Form CDP-1
April 2004
Form must be Typed

Submit in Duplicate

Operator Name: Double "D",s LLC		License Number: 33786	
Operator Address: 133 East 12th st		Hays Ks 67601	
Contact Person: Duane Bieker		Phone Number: 785-230-0113	
Lease Name & Well No.: North 5		Pit Location (QQQQ): SE - NE - SW Sec. 28 Twp. 15 R. 20 <input type="checkbox"/> East <input checked="" type="checkbox"/> West 1,650 Feet from <input checked="" type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section 2,970 Feet from <input checked="" type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section Ellis County	
Type of Pit: <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Burn Pit <input type="checkbox"/> Settling Pit <input type="checkbox"/> Drilling Pit <input checked="" type="checkbox"/> Workover Pit <input type="checkbox"/> Haul-Off Pit <small>(If WP Supply API No. or Year Drilled)</small>		Pit is: <input checked="" type="checkbox"/> Proposed <input type="checkbox"/> Existing If Existing, date constructed: _____ Pit capacity: 200 (bbls)	
Is the pit located in a Sensitive Ground Water Area? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Chloride concentration: _____ mg/l <small>(For Emergency Pits and Settling Pits only)</small>	
Is the bottom below ground level? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Artificial Liner? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
How is the pit lined if a plastic liner is not used?			
Pit dimensions (all but working pits): 10 Length (feet) 5 Width (feet) <input type="checkbox"/> N/A: Steel Pits Depth from ground level to deepest point: 8 (feet) <input type="checkbox"/> No Pit			
If the pit is lined give a brief description of the liner material, thickness and installation procedure. plastic pit liner		Describe procedures for periodic maintenance and determining liner integrity, including any special monitoring. daily visual inspection	
Distance to nearest water well within one-mile of pit N/A feet Depth of water well _____ feet		Depth to shallowest fresh water _____ feet. Source of information: <input type="checkbox"/> measured <input type="checkbox"/> well owner <input type="checkbox"/> electric log <input type="checkbox"/> KDWR	
Emergency, Settling 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 pit? <input type="checkbox"/> Yes <input type="checkbox"/> No		Drilling, Workover and Haul-Off Pits ONLY: Type of material utilized in drilling/workover: salt water Number of working pits to be utilized: 2 Abandonment procedure: haul fluids off backfill with dirt 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.			
7/9/2009 Date		 Signature of Applicant or Agent	
JUL 10 2009 RECEIVED			
KCC OFFICE USE ONLY Steel Pit <input type="checkbox"/> RFAC <input type="checkbox"/> RFAS <input type="checkbox"/>			
Date Received: 7/10/09 Permit Number: _____ Permit Date: 7/10/09 Lease Inspection: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

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

15-051-30358-00-01

KANSAS
CORPORATION COMMISSION
Colorado Derby Building
Wichita, Kansas 67202

WELL PLUGGING RECORD
K.A.R.-82-3-117

-051-32358-00-DD
API NUMBER 15 - - - 1966

LEASE NAME A. NORTH

WELL NUMBER # 5

1650 Ft. from S Section Line

2970 Ft. from E Section Line

SEC. 28 TWP. 15S RGE. 20 (W)

COUNTY ELLIS

Date Well Completed 8-29-66

Plugging Commenced 11-16-94

Plugging Completed 11-16-94

TYPE OR PRINT
NOTICE: Fill out completely
and return to Cons. Div.
office within 30 days.

LEASE OPERATOR Rains & Williamson Oil Co., Inc.

ADDRESS 220 W. Douglas Suite 435 Wichita, Kansas 67202

PHONE# (316) 265-9686 OPERATORS LICENSE NO. 5146

Character of Well Oil

(Oil, Gas, D&A, SWD, Input, Water Supply Well)

The plugging proposal was approved on 10-4-94 (date)

by Carl Goodrow (KCC District Agent's Name).

Is ACO-1 filled? Yes If not, is well log attached?

Producing Formation Depth to Top Bottom T.D. 3990

Show depth and thickness of all water, oil and gas formations.

OIL, GAS OR WATER RECORDS

CASING RECORD

Formation	Content	From	To	Size	Put in	Pulled out
				8 5/8"	239	None
				5 1/2"	3988	None

Describe in detail the manner in which the well was plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. If cement or other plugs were used, state the character of same and depth placed, from feet to feet each set.

Down 5 1/2" casing w/ 50 sx. cement blend w/ 200# hulls mixed in - followed w/ 15 sx. gel w/ 100# hulls mixed in followed w/ 200 sx. cement blend to Max. Press. 1200#. Closed in PSI 0#. w/ cement at surface. Cement @ surface in 8 5/8" tested to 300#. Job Complete

(If additional description is necessary, use BACK of this form.)

Name of Plugging Contractor Halliburton License No.

Address Hays, Kansas 67601

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Rains & Williamson Oil Co., Inc.

STATE OF Kansas COUNTY OF Sedgwick, ss.

A. D. BELT (Employee of Operator) or (Operator) of above-described well, being first duly sworn on oath, says: That I have knowledge of the facts, statements, and matters herein contained and the log of the above-described well as filed that the same are true and correct, so help me God.

(Signature) Juanita M. Exum

(Address) 220 W. Douglas, Suite 435, Wichita, KS 67202

SUBSCRIBED AND SWORN TO before me this 14th day of February 1995

My Commission Expires: 7-2-98

Teresa L. Burleigh-Smith