

OWWO

For KCC Use: 2-17-2010
Effective Date: 2-17-2010
District # 1
SGA? Yes No

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: 02 22 2010
month day year

OPERATOR: License# 32198 ✓
Name: Petrosantander (USA) Inc
Address 1: 6363 Woodway dr Suite 350
Address 2: _____
City: Houston State: TX Zip: 77057 + _____
Contact Person: Lilliana Hernandez
Phone: 713-784-8700
CONTRACTOR: License# 33784 ✓
Name: Trinidad Drilling Limited Partnership

Spot Description: _____
_____ C _____ SE _____ NW Sec. 1 Twp. 33 S. R. 30 E W
(a/a/a/a) 1,980 feet from N / S Line of Section
1,980 feet from E / W Line of Section

Is SECTION: Regular Irregular?

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

County: Meade
Lease Name: Edna Collingwood Well #: 4
Field Name: Stevens

Is this a Prorated / Spaced Field? Yes No

Target Formation(s): MORROW

Nearest Lease or unit boundary line (in footage): 1980'

Ground Surface Elevation: 2725' 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: ~540

Depth to bottom of usable water: ~540

Surface Pipe by Alternate: I II

Length of Surface Pipe Planned to be set: 1514' (existing)

Length of Conductor Pipe (if any): (NONE)

Projected Total Depth: ~5900'

Formation at Total Depth: MISSISSIPPIAN

Water Source for Drilling Operations:

Well Farm Pond Other: _____

DWR Permit #: _____

(Note: Apply for Permit with DWR)

Will Cores be taken? Yes No

If Yes, proposed zone: _____

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

If OWWO: old well information as follows:

Operator: Gulf Oil Corp
Well Name: Edna Collingwood 4
Original Completion Date: 04-10-1957 Original Total Depth: 5870'

Directional, Deviated or Horizontal wellbore? Yes No

If Yes, true vertical depth: _____

Bottom Hole Location: _____

KCC DKT #: _____

AFFIDAVIT

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: 02/09/2010 Signature of Operator or Agent: [Signature] Title: Senior Engineer

For KCC Use ONLY
API # 15 - 119-10090-00-01
Conductor pipe required None feet
Minimum surface pipe required 1514 feet per ALT. I II
Approved by: [Signature] 2-12-2010
This authorization expires: 2-12-2011
(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: _____

1
33
30
m
X

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FEB 12 2010
KCC WICHITA

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 - 119-10090-00-01
 Operator: Petrosantander (USA) Inc
 Lease: Edna Collingwood
 Well Number: 4
 Field: Stevens

Location of Well: County: Meade
 1,980 feet from N / S Line of Section
 1,980 feet from E / W Line of Section
 Sec. 1 Twp. 33 S. R. 30 E W

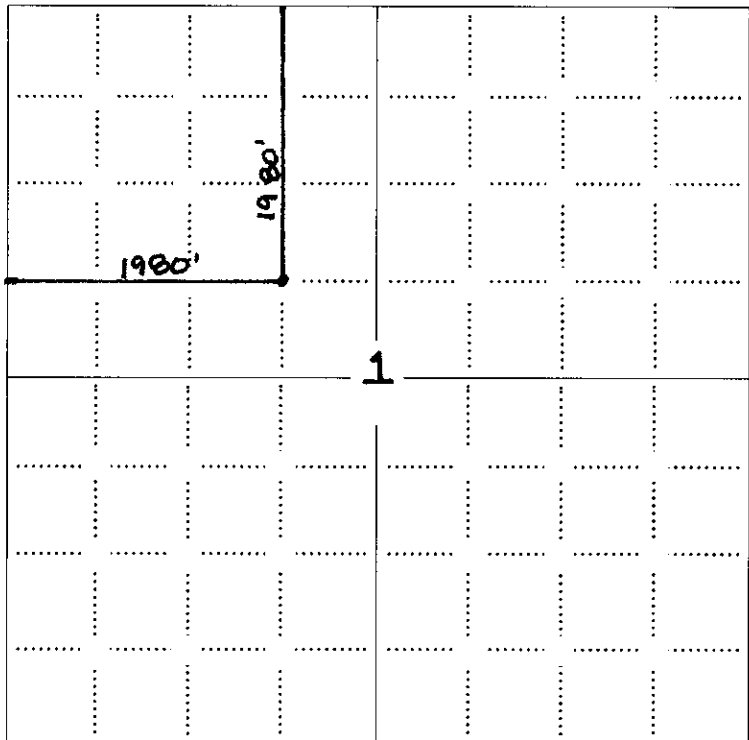
Number of Acres attributable to well: _____
 QTR/QTR/QTR/QTR of acreage: _____ - C - SE - NW

Is Section: Regular or Irregular

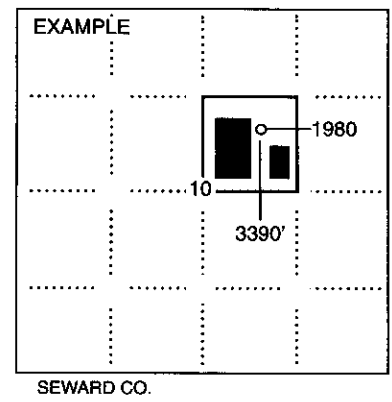
If Section is Irregular, locate well from nearest corner boundary.
 Section corner used: NE NW SE SW

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.)*



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

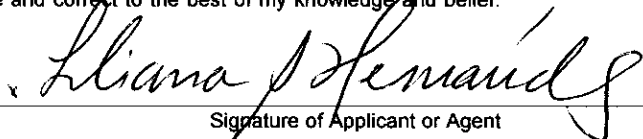
In plotting the proposed location of the well, you must show:

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).
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: Petrosantander (USA) Inc		License Number: 32198	
Operator Address: 6363 Woodway dr Suite 350			
Contact Person: Liliana Hernandez		Phone Number: 713-784-8700	
Lease Name & Well No.: Edna Collingwood # 4		Pit Location (QQQQ): C SE NW	
Type of Pit: <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Burn Pit <input type="checkbox"/> Settling Pit <input checked="" type="checkbox"/> Drilling Pit <input type="checkbox"/> Workover Pit <input type="checkbox"/> Haul-Off Pit <small>(If WP Supply API No. or Year Drilled) 15-119-10090</small>		Pit is: <input checked="" type="checkbox"/> Proposed <input type="checkbox"/> Existing If Existing, date constructed: _____ Pit capacity: _____ (bbbls)	
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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
How is the pit lined if a plastic liner is not used? Natural Clay and Drilling Mud			
Pit dimensions (all but working pits): <u>100</u> Length (feet) <u>100</u> Width (feet) <input checked="" type="checkbox"/> N/A - Steel Pits Depth from ground level to deepest point: <u>4</u> (feet) <input type="checkbox"/> 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 FEB 12 2010 KCC WICHITA	
Distance to nearest water well within one-mile of pit <u>4864</u> feet Depth of water well <u>396</u> feet		Depth to shallowest fresh water <u>183</u> feet. Source of information: <input type="checkbox"/> measured <input type="checkbox"/> well owner <input type="checkbox"/> electric log <input checked="" 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: <u>Drilling Mud</u> Number of working pits to be utilized: <u>1</u> Abandonment procedure: <u>Backfill and level when sufficiently dry</u> 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.			
<u>02/09/2010</u> Date		 Signature of Applicant or Agent	

15-119-10090-00-01

KCC OFFICE USE ONLY		Steel Pit <input type="checkbox"/>	RFAC <input type="checkbox"/>	RFAS <input type="checkbox"/>
Date Received: <u>2-12-10</u>	Permit Number: _____	Permit Date: <u>2-12-10</u>	Lease Inspection: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

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

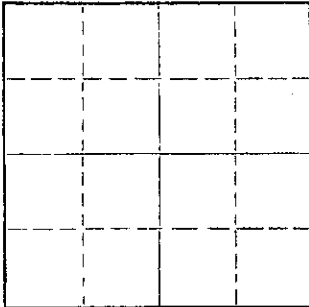
15-119-1009000-00

STATE OF KANSAS
STATE CORPORATION COMMISSION

Form CP-4

WELL PLUGGING RECORD

Give All Information Completely
Make Required Affidavit
Mail or Deliver Report to:
Conservation Division
State Corporation Commission
P. O. Box 17027
Wichita, Kansas 67217
NORTH



Locate well correctly on above
Section Flat

_____ Mead _____ County, Sec. 1 Twp. 33S Rge. (E) 30 (W)
Location as "NE/CNWSW" or footage from lines C SE NW
Lease Owner: Gulf Oil Company
Lease Name: Edna Collingwood Well No #4
Office Address: West of City, Woodward, Oklahoma 73801
Character of Well (completed as Oil, Gas or Dry Hole) _____
Date well completed _____ 19____
Application for plugging filed _____ 19____
Application for plugging approved _____ 19____
Plugging commenced July 24 _____ 19____
Plugging completed July 27 _____ 19____
Reason for abandonment of well or producing formation _____
If a producing well is abandoned, date of last production _____ 19____
Was permission obtained from the Conservation Division or its agents before plugging was commenced? yes

Name of Conservation Agent who supervised plugging of this well _____
Producing formation _____ Depth to top _____ Bottom _____ Total Depth of Well 5870 Feet
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
				5 1/2"	5870'	2739.46'
				8 5/8"	1514'	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 for each plug set.

Shot at 2719', spotted 50 sacks cement, displaced with mud, from 1564' - 1464', capped surface with 10 sacks cement 3' - 33', welded on steel plate.

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STATE CORPORATION COMMISSION
AUG 13 1974
CONSERVATION DIVISION
Wichita, Kansas

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STATE CORPORATION COMMISSION
AUG 15 1974
CONSERVATION DIVISION
Wichita, Kansas

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

Name of Plugging Contractor: Lillard Casing Pulling, Inc.
Address: Box 962, Woodward, Oklahoma 73801

STATE OF Oklahoma, COUNTY OF Woodward, ss.

Lawrence L. Lillard (employee of owner) or (owner or operator) of the 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 and that the same are true and correct. So help me God.

(Signature) Lawrence L. Lillard

(Address)

Subscribed and Sworn to before me this 8 day of August, 1974

My commission expires 3-20-75
Mettha Ediger Notary Public.