#### RECEIVED

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For KCC Use:	>- 2//-2010
Effective Date:	7-24-2010
District #	3
SGA? Yes	No

Kansas Corporation Commission Oil & Gas Conservation Division

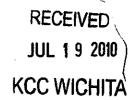
KCC WICHIT

March 2010 Form must be Typed Form must be Signed All blanks must be Filled

Form C-1

#### NOTICE OF INTENT TO DRILL

Expected Spud Date:July 23.	74	Spot Description:	
month	day year	NW NE SW NE Sec. 5 Twp. 31	o <b>s</b> 14 <b>[2]</b> - [2]
OPERATOR: License#33365 *		(Q/Q/Q/Q) 1,510 Sec	S. R. T. WELLW
Name: Layne Energy Operating, LLC		leet from XIV	/ S Line of Section
Address 1: 1900 Shawnee Mission Parkw	vav	Is SECTION: Regular Irregular?	/ W Line of Section
Address 2:		is SECTION. Regular Imegular?	
City: Mission Woods State	e: KS Zip: 66205 + 2001	(Note: Locate well on the Section Plat on n	everse side)
Contact Person: Victor H. Dyal		County: Montgomery	***************************************
Phone: 913-748-3960		Lease Name: Lawrence	Well #: 7G-5
CONTRACTOR: License# 33606		Field Name: Elk-Bity Northeast Unnamed	
Name: Thornton Air Rotary, LLC	174.2	Is this a Prorated / Spaced Field?	☐Yes XNo
traile,		Target Formation(s): Cattleman Sands	
Well Drilled For: Well Cl	lass: Type Equipment:	Nearest Lease or unit boundary line (in footage):	<u>165</u>
Xoil ☐Enh Rec ☐nf	fieldMud Rotary	Ground Surface Elevation: 913	feet MSL
☐Gas ☐Storage ズPo	ool Ext. X Air Rotary	Water well within one-quarter mile:	Yes X No.►
<b>Disposal</b> Wi	ildcat Cable	Public water supply well within one mile:	Yes X No
Seismic ; # of Holes Ot	ther	Depth to bottom of fresh water: 150'	
Other:		Depth to bottom of usable water: 175'	
f OWWO: old well information as	follows:	Surface Pipe by Alternate:	
_ <del>_</del>		Length of Surface Pipe Planned to be set: 20'	
Operator;		Length of Conductor Pipe (if any): None	
Well Name:		Projected Total Depth: 1300'	
Original Completion Date:	Original Total Depth:	Formation at Total Depth: Mississippian	
Disastinasi Davistasi - Harisasalah ada		Water Source for Drilling Operations	
Directional, Deviated or Horizontal wellbor		Well Farm Pond Other:	
If Yes, true vertical depth:		DWR Permit #:	···
		(Note: Apply for Permit with DWR	<b>7</b>
KCC 0KT #-		( total ) ppy lot ( civil thin Divi)	
KCC DKT #:		Will Cores be taken?	ິ ∐Yes ⊠No໌
KCC DKT #:		<b>1</b>	Yes No
KCC DKT #:		Will Cores be taken? If Yes, proposed zone:	Yes No
	AFI	Will Cores be taken? If Yes, proposed zone:  FIDAVIT	Yes No
The undersigned hereby affirms that the	<b>AF</b> le drilling, completion and eventual plu	Will Cores be taken? If Yes, proposed zone:	Yes No
The undersigned hereby affirms that the	AFI e drilling, completion and eventual plu requirements will be met:	Will Cores be taken? If Yes, proposed zone:  FIDAVIT	Yes No
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The undersigned hereby affirms that the It is agreed that the following minimum r.  1. Notify the appropriate district offic.  2. A copy of the approved notice of i.  3. The minimum amount of surface provided the interverse and int	AFI e drilling, completion and eventual plus requirements will be met; ce prior to spudding of well; intent to drill shall be posted on each pipe as specified below shall be set ials plus a minimum of 20 feet into the ent between the operator and the dist be notified before well is either plugg ON, production pipe shall be cemente stern Kansas surface casing order #1 s of the spud date or the well shall be the herein are true and to the best of n the of Operator or Agent:  The open feet One feet per ALT. If the	Will Cores be taken?  If Yes, proposed zone:  FIDAVIT  Urgging of this well will comply with K.S.A. 55 et. seq.  In drilling rig;  by circulating cement to the top; in all cases surface pipe as a underlying formation.  It ict office on plug length and placement is necessary priority of the priority of the priority of the priority of the plug and usable water to surface within 120 DAYS 133,891-C, which applies to the KCC District 3 area, alternate plugged. In all cases, NOTIFY district office priority of the priority of t	Shall be set  If to plugging;  Sof spud date. ate II cementing by cementing.  The of Engineering  Owner Notification  The office
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The undersigned hereby affirms that the It is agreed that the following minimum r.  1. Notify the appropriate district office.  2. A copy of the approved notice of it.  3. The minimum amount of surface provided through all unconsolidated materithms.  4. If the well is dry hole, an agreement of it. The appropriate district office will on the propriate district office will on pursuant to Appendix "B" - Easy must be completed within 30 days thereby certify that the statements made the provided approved by:  API # 15 - 125 - 3200 4  Conductor pipe required  Minimum surface pipe required  Approved by:  This authorization expires: 7-19	AFI e drilling, completion and eventual plus requirements will be met; ce prior to spudding of well; intent to drill shall be posted on each pipe as specified below shall be set ials plus a minimum of 20 feet into the ent between the operator and the dist be notified before well is either plugg ON, production pipe shall be cemente stern Kansas surface casing order #1 s of the spud date or the well shall be the herein are true and to the best of n the of Operator or Agent:  The open feet One feet per ALT. If the	Will Cores be taken?  If Yes, proposed zone:  FIDAVIT  Urgging of this well will comply with K.S.A. 55 et. seq.  In drilling rig;  by circulating cement to the top; in all cases surface pipe as a underlying formation.  It ict office on plug length and placement is necessary priority of the priority of the priority of the priority of the plug and usable water to surface within 120 DAYS 133,891-C, which applies to the KCC District 3 area, alternate plugged. In all cases, NOTIFY district office priority of the priority of t	shall be set  r to plugging;  sof spud date. ate Il cementing y cementing.  r of Engineering  Owner Notification  e; ders; r or re-entry; d (within 60 days); water. ized expiration date)



For KCC Use ONLY API#15-125-32004-000

Operator: Layne Energy Operating, LLC

# IN ALL CASES PLOT THE INTENDED WELL ON THE PLAT BELOW

In all cases, please fully complete this side of the form. Include items 1 through 5 at the bottom of this page.

France Energy Operating, LLC		Location of We	II: County: Montgon	nery		
Lawrence 7.0 5		1,510	fee	t from 🔀 N /	□ s to	e of Sec
mber: 7G-5		1,918	fee	t from X E /		e of Sec
ik City Northeast		Sec. 5	Twp. 31 S		X E [	7
of Acres attributable to wall						_l w
of Acres attributable to well		Is Section:	Regular or	Irregular		
TR/QTR/QTR of acreage: NW N	E SW - NE	-	_	ogala,		
		If Section is Irr	regular, locate wel	from nearest o	omer hour	ıdan.
		Section corner (	used: NE		lsw	ruary.
				····	1011	
	P	LAT				
Show location of the well. Si	how footage to the nearest li	ease or unit boundar	ry line Show the ne	notional transit	,	
lease roads tank batteries, pipeline	s and electrical lines as red	uired by the Kansas	Surface Owner No	Suicied locations	Of Distribution	
	You may attach a se	eparate plat if desired	dinace Owner NO	iice Act (House i	Bill 2032)	
MONTGOMERY CO	1918' FEL		<b>.</b>			
				LEGEND		
÷ : : : : : : : : : : : : : : : : : : :			O	Well Location		
The services of the services o		:	L	Tank Battery		
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<u> </u>	LAWRE	NE	EXAMPLE			
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				<b>•</b>		1980' F
				<b>?</b>		1980' F
						1980' F
						1980' F
			SEWARD CO. 33			1980' F

# 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.
- 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)
- 5. The predicted locations of lease roads, tank batteries, pipelines, and electrical lines.

# RECEIVE

#### Kansas Corporation Commission Oil & Gas Conservation Division

# JUL 1

Form CDP-1 May 2010 Form must be Typed

# APPLICATION FOR SURFACE PITKCC WICHILL

Submit in Duplicate

Operator Name: Layne Energy Operat	ing, LLC		License Number: 33365
Operator Address: 1900 Shawnee	Mission Park	way	Mission Woods KS 66205
Contact Person: Victor H. Dyal			Phone Number: 913-748-3960
Lease Name & Well No.: Lawrence	7G	-5	Pit Location (QQQQ):
Type of Pit:  Emergency Pit  Settling Pit  X Drilling Pit	Pit is:  X Proposed  If Existing, date cor	Existing	NW - NE - SW - NE  Sec. 5 Twp. 31 R. 14 X East West  1,510 Feet from X North / South Line of Section
Workover Pit Haul-Off Pit (If WP Supply API No. or Year Drilled)	Pit capacity:	(bbls)	1,918 Feet from X East / West Line of Section  Montgomery County
Is the pit located in a Sensitive Ground Water A	rea? Yes 🔀	No .	Chloride concentration: mg/l  (For Emergency Pits and Settling Pits only)
Is the bottom below ground level?  X Yes No	Artificial Liner?	ło	How is the pit lined if a plastic liner is not used?  Made of clay
Pit dimensions (all but working pits):	Length (fee	•	Width (feet) N/A: Steel Pits No Pit
Distance to nearest water well within one-mile of	of pit:	Depth to shallo Source of infor	west fresh waterfeet.
None feet Depth of water well	feet	measured	well owner electric log KDWR
Emergency, Settling and Burn Pits ONLY:		-	over and Haul-Off Pits ONLY: fresh water mud
Producing Formation:		71	al utilized in drilling/workover:
Number of producing wells on lease:		Abandonment	king pits to be utilized:  Let evaporate until dry; then
Does the slope from the tank battery allow all s flow into the pit? Yes No			backfill and restore ne closed within 365 days of spud date.
I hereby certify that the above statem	nents are true and cor	rect to the best of	my knowledge and belief.
7/16/2010 Date	<u>4</u>	MATH.	Gnature of Applicant or Agent
Date Received: 7-19-10 Permit Num		OFFICE USE O	NLY  Liner Steel Pit K RFAC RFAS  it Date: 7 - 19 - 10 Lease Inspection: Yes No

Mark Parkinson, Governor Thomas E. Wright, Chairman Joseph F. Harkins, Commissioner Ward Loyd, Commissioner

July 19, 2010

Layne Energy Operating LLC 1900 Shawnee Mission Parkway Mission Woods, KS 66205-2001

RE: Drilling Pit Application

Lawrence Lease Well No. 7G-5

NE/4 Sec. 05-31S-14E Montgomery County, Kansas

Dear Sir or Madam:

District staff has inspected the above referenced location and has determined that the reserve pit shall be constructed <u>without slots</u>, the bottom shall be flat and reasonably level, and the free fluids must be removed. The fluids are to be removed from the reserve pit as soon as practical after drilling operations have ceased.

If production casing is set all completion fluids shall be removed from the working pits daily. NO completion fluids or non-exempt wastes shall be placed in the reserve pit.

The fluids should be taken to an authorized disposal well. Please call the District Office at (620) 432-2300 when the fluids have been removed. Please file form CDP-5 (August 2004), Exploration and Production Waste Transfer, within 30 days of fluid removal. Conservation division forms are available through our office and on the KCC web site: www.kcc.state.ks.us/conservation/forms.

A copy of this letter should be posted in the doghouse along with the approved Intent to Drill.

If you have any questions or concerns please feel free to contact the undersigned at the above address.

Sincerely,

Kathy Haynes

**Environmental Protection and Remediation Department** 

cc: File

RECEIVED

15-125-32004-00-00

2010 JUL 1 9 2010

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

# **KC**C WICHITA

Form KSONA-1
July 2010
Form Must Be Typed
Form must be Signed
All blanks must be Filled

# CERTIFICATION OF COMPLIANCE WITH THE KANSAS SURFACE OWNER NOTIFICATION ACT

This form must be submitted with all Forms C-1 (Notice of Intent to Drill); CB-1 (Cathodic Protection Borehole Intent); T-1 (Request for Change of Operator Transfer of Injection or Surface Pit Permit); and CP-1 (Well Plugging Application).

Any such form submitted without an accompanying Form KSONA-1 will be returned.

Select the corresponding form being filed: C-1 (Intent) CB-1 (	Cathodic Protection Borehole Intent) T-1 (Transfer) CP-1 (Plugging Application)
OPERATOR: License # 33365	Well Location:
OPERATOR: License # 33365  Name: Layne Energy Operating, LLC  Address 1: 1900 Shawnee Mission Parkway	NW NE SW NE Sec. 5 Twp. 31 S. R. 14 XEas West
Address 1: 1900 Shawnee Mission Parkway	County: Montgomery
	Lease Name: Lawrence Well #: 7G-5
City: Mission Woods State: KS Zip: 66205 + 2001  Contact Person: Victor H. Dyal  Phone: ( 913 ) 748-3960 Fax: ( 913 ) 748-3950  Email Address: vdyal@layneenergy.com	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:
Phase ( 913 ) 748-3960 Fav. ( 913 ) 748-3950	
Email Address: vdyal@layneenergy.com	
Surface Owner Information:  Name: Kevin L. & Jennifer D. Lawrence  Address 1: 6450 CR 2500  Address 2: City: Elk City State: KS Zip: 67344 +	When filing a Form T-1 involving multiple surface owners, attach an additional sheet listing all of the information to the left for each surface owner. Surface owner information can be found in the records of the register of deeds for the county, and in the real estate property tax records of the county treasurer.
the KCC with a plat showing the predicted locations of lease roads, tank	dic Protection Borehole Intent), you must supply the surface owners and a batteries, pipelines, and electrical lines. The locations shown on the plat in the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.
I certify that, pursuant to the Kansas Surface Owner Notice A owner(s) of the land upon which the subject well is or will be let CP-1 that I am filing in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax, a	ocated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form being filed is a Form C-1 or Form CB-1, the plat(s) required by this
	cknowledge that, because I have not provided this information, the vner(s). To mitigate the additional cost of the KCC performing this fee, payable to the KCC, which is enclosed with this form.
If choosing the second option, submit payment of the \$30.00 handling form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-	fee with this form. If the fee is not received with this form, the KSONA-1 will be returned.
I hereby certify that the statements made herein are true and correct to	the best of my knowledge and belief.
Date: 7/16/2010 Signature of Operator or Agent:	Title: Manager of Engineering