	RECEIVED
OIL & G	CORPORATION COMMISSION JUL 1 9 2010 Form C-1 March 2010 Form must be Typed
Must be approved by	E OF INTENT TO DRILL KCC five (5) days prior to commencing well be Submitted with this form. KCC five (5) days prior to commencing well be Submitted with this form.
Expected Spud Date: July 23 2010	
month day year OPERATOR: License#	Sec. 3 Twp. 22 S. R. 40 LE W (O/G/G/G/G) 1.320 feet from N / S Line of Section
Name: W.R. Williams, Inc.	1,320 feet from E / W Line of Section
Address 1: P.O. Box 15163 Address 2:	Is SECTION: Regular Irregular?
City: Amarillo State: TX Zip: 79105 + 5 Contact Person: Rob Williams	County: Teatment
Phone: 806 374-4555	Lease Name: Groves Well #: 1
CONTRACTOR: License# 33784	rielo Natrie.
Name: Trinidad Drilling, LP	Is this a Prorated / Spaced Field? Target Formation(s): Upper Winfield /
Well Drilled For: Well Class: Type Equipmen	Necessaria and a superior supe
Oil Enh Rec Infield IMMud Rotar	Crowd Surface Elevation 3538
X Gas Storage Pool Ext. Air Rotary	Water well within one-quarter mile:
Disposal Wildcat Cable	Public water supply well within one mile: Yes No
Seismic ; # of HolesOther	Depth to bottom of fresh water: 220 Depth to bottom of usable water: 1150
Other:	Surface Pipe by Alternate:
If OWWO: old well information as follows:	Length of Surface Pipe Planned to be set: 270'
Operator:	Length of Conductor Pipe (if any): None
Well Name:	Projected Total Depth: 2840'
Original Completion Date: Original Total Depth:	
	Water Source for Drilling Operations: S No Well Farm Pond Other: Hauling
If Yes, true vertical depth: Bottom Hole Location:	DWR Permit #:
KCC DKT #:	(Note: Apply for Permit with DWR WIII Cores be taken?
	If Yes, proposed zone:
PRORATED & SPACED: HUGOTON-PANOMA	
The undersigned hereby affirms that the drilling, completion and e	AFFIDAVIT
It is agreed that the following minimum requirements will be met;	ventual plugging of this well will comply with K.S.A. 55 et. seq.
Notify the appropriate district office <i>prior</i> to spudding of well	ı.
through all unconsolidated materials plus a minimum of 20 f 4. If the well is dry hole, an agreement between the operator a 5. The appropriate district office will be notified before well is e 6. If an ALTERNATE II COMPLETION, production pipe shall be	all be set by circulating cement to the top; in all cases surface pipe shall be set eet into the underlying formation. Indeed the district office on plug length and placement is necessary prior to plugging; either plugged or production casing is cemented in; ecomented from below any usable water to surface within 120 DAYS of soud date.
Or pursuant to Appendix "B" - Eastern Kansas surface casin	g order #133,891-C, which applies to the KCC District 3 area, alternate II cementing
	ell shall be plugged. In all cases, NOTIFY district office prior to any cementing.
I hereby certify that the statements made herein are true and to the	e best of my knowledge and belief.
Date: July 15, 2010 Signature of Operator or Agent:	I've fille: President
For KCC Use ONLY	Remember to:
API # 15 - 075-20853-00-00	- File Certification of Compliance with the Kansas Surface Owner Notification Act (KSONA-1) with Intent to Drill;
Conductor pipe required None feet	- File Drill Pit Application (form CDP-1) with Intent to Drill;
Minimum surface pipe required 240 feet per ALT.	- File Completion Form ACO-1 within 120 days of spud date;
Approved by: 244 7-20-2010	- File acreage attribution plat according to field proration orders; - Notify appropriate district office 48 hours prior to workover or re-entry;
This authorization expires: 7-20-2011	- Submit plugging report (CP-4) after plugging is completed (within 60 days);
(This authorization void if drilling not started within 12 months of approval	

If well will not be drilled or permit has expired (See: authorized expiration date)

please check the box below and return to the address below.

Well will not be drilled or Permit Expired Date:

Signature of Operator or Agent:

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

. Agent:

Spud date:

For KCC Use ONLY
API # 15 - 075 - 2085 3-00-05

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.

Operator:	W.R. Williams, Inc.	Location of Well: County: Hamilton
Lease:	Groves	1,320 feet from N / N S Line of Section
Well Number:	1	1,320 feet from \times E / \times W Line of Section
Field:	Bradshaw	Sec. 3 Twp. 22 S. R. 40 E X W
Number of Acres	s attributable to well: 400 QTR of acreage: C _ SE	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. Show footage to the nearest lease or unit boundary line. Show the predicted locations of lease roads, tank batteries, pipelines and electrical lines, as required by the Kansas Surface Owner Notice Act (House Bill 2032). You may attach a separate plat if desired.

 W.R. Williams, Inc 400 Acres	C		O Well Location Tank Battery Loc Pipeline Location Electric Line Location Lease Road Location	Acc WICHI
3			EXAMPLE	
 Gi	roves 1 2—13	20		
	1320!		SEWARD CO. 3390 FEL	1980' FSL

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.

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

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

PLAT AND CERTIFICATION OF ACREAGE ATTRIBUTABLE TO A GAS WELL

Kansas Corporation Commission, Conservation Division Finney State Office Building, 130 South Market, Room 2078 Wichita, Kansas 67202

OPERATOR	W.R. Williams,	Inc.	LOCATION OF	WELL: COUNTY	Hamilton
LEASE	Groves		1320 feet	from (south)	north line of secti
VELL NUMBER	1		1320 feet	from(east)/	west line of secti
FIELD	Bradshaw			- -	
TIMPED OF SON			SECTION_3	TWP_22	(S) RG 40 E
TR/OTR/OTR	S ATTRIBUTABLE ACREAGE SE4	TO WELL 400	IS SECTION_	X REGULAR	or IRREGULAR
/ 2/ 2231 01	NCKENGE DD4	- 1004 - WZIVE 4	NEADEST CODE	IS IRREGULAR,	LOCATE WELL FROM
			Section corn	er used: N	(check line below TE NW SE
Show the loca	tion of the well	and shade attri	butable acrea	ge for prorat	ed or enegativella
SHOW THE TOOK	age to the neare	st lease or unit	boundary line	; and show fo	ootage to the neare
common source	supply well).				
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				SEWARD CO	•
Mha wadawa					
THE UNDELBI	gned hereby cer	CIIIes as	President		(title) f
W.R.	Williams, Inc.		4.		_
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eage claimed	attributable to	o the well name	the best of m	in knowleade	and belief, that a tion from that we
hereby make	application for	r an allowable t	o po sestavoj Meretu IB Uš	to by produc	tion from that we upon the filing
s form and th	ne State test,	whichever is lat	er.	ro rue Mell	upon the filing
		Signatu	re ful d	Allean	
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scribed and s	worn to before m	e on this 15th	day of	July	, 19 2010
			(D^{-1})	114.11.	•
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	S MINEY AZON 1	INDA K. MCKP em			
Commission ex	5 5 4 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	INDA K. MCKPAN Notary Public, State of Texas		Notary Pu	blic

RECEIVED

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

JUL 1 9 2010

Form CDP-1 May 2010 Form must be Typed

APPLICATION FOR SURFACE PIT

KCC WICHITA

		ubmit in Duplic	ate			
Operator Name: W.R. V	/illiams, Inc.		License Number:	32920		
Operator Address: P.O. I	Box 15163			Amarillo,	TX	79105
Contact Person: Rob V	Villiams		Phone Number:	806 374-4555	;	
Lease Name & Well No.: Gro	ves	1	Pit Location (QQQ	Q):		
Type of Pit:	Pit is:			. C _ SE		
Emergency Pit Burn Pit	X Proposed	Existing	Sec. 3 Twp.	22 _{R.} 40	East 🔀	West
Settling Pit	If Existing, date co	onstructed:	1,320 _{Feet}	t from North / X S	outh Line of	Section
Workover Pit Haul-Off Pi	Pit capacity: 2,670	(bbls)	1 220	from 🔀 East / 🗌 W	Vest Line of	
Is the pit located in a Sensitive Ground Wi	ater Area? Yes	√No	Chloride concentrati	ion:		
Is the bottom below ground level? X Yes No	Artificial Liner?	No	How is the pit lined i Bentonite from d	f a plastic liner is not us rilling fluids	sed?	
If the pit is lined give a brief description of material, thickness and installation proced		Describe proce	edures for periodic main	ntenance and determini	lo Pit ing	
Distance to nearest water well within one-r	nile of pit:	Depth to shallo Source of infor	west fresh water	40 feet.		(
N/A feet Depth of water we	lfeet	measured	well owner	electric log	X KDW	/R
Emergency, Settling and Burn Pits ONL	/ :	Drilling, Work	over and Haul-Off Pits	ONLY:		
Producing Formation:		Type of materia	ıl utilized in drilling/worl	kover: Fresh Water N	Mud	
Number of producing wells on lease:		Number of wor	king pits to be utilized:	0		
Barrels of fluid produced daily:		Abandonment	procedure: EV	aporation & Ba	ckfilling	
Does the slope from the tank battery allow flow into the pit? Yes No	ali spilled fluids to	Drill pits must b	e closed within 365 da	ys of spud date.	·	
I hereby certify that the above standard of the standard of th	atements are true and corr	lik p	my knowledge and beli			
	KCC	OFFICE USE OI				
Date Received: 7-29-19 Permit N	lumber:	Permi	Liner	Steel Pit R	_	RFAS

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

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

15075-20853000

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.

OPERATOR: License # 32920	Well Location:
Name: W.R. Williams, Inc.	C SE Sec. 3 Twp. 22 S. R. 40 Eas X West
Address 1: P.O. Box 15163	County: Hamilton
Address 2:	Lease Name: Groves Well #: 1
City: AmarilloState: TXZip: 79105+ 5 1 6 3	
Contact Person: Rob Williams	If filing a Form T-1 for multiple wells on a lease, enter the legal description o the lease below:
Phone: (806) 374-4555 Fax: (806) 374-4555	RECEIVED
Email Address: wrwep@hotmail.com	
	JUL 1 9 2010
Surface Owner Information:	KCC WICHITA
Name: Edith T. Groves, Trustee	When filling a Form T-1 involving multiple surface owners, attach an additional
Address 1:C/o Jim Groves	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
Address 2:17015 NE 136th PI City:Redmond State:WA 98052	county, and in the real estate property tax records of the county treasurer.
If this form is being submitted with a Form C-1 (Intent) or CR-1 (Catho	die Protection Beschalt (u. 1)
Select one of the following: 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 location; and 3) my operator name, address, phone number, fax, and I have not provided this information to the surface owner(s). Lace	cheated. I) 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 and email address. Cknowledge that, because I have not provided this information, the proof(s). To criticate the last the last the proof(s).
Select one of the following: 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 location with this form; 2) if the form to form; and 3) my operator name, address, phone number, fax, and I have not provided this information to the surface owner(s). I acknowledge that I am being charged a \$30.00 handling of 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-1	act (House Bill 2032), I have provided the following to the surface pocated: 1) a copy of the Form C-1, Form CB-1, Form CB-1, Form T-1, or Form peing filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address. Cocknowledge that, because I have not provided this information, the mer(s). To mitigate the additional cost of the KCC performing this fee, payable to the KCC, which is enclosed with this form. If the fee is not received with this form, the KSONA-1 will be returned.
Are preliminary non-binding estimates. The locations may be entered of Select one of the following: 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 located that I am filing in connection with this form; 2) if the form to form; and 3) my operator name, address, phone number, fax, and I have not provided this information to the surface owner(s). I acknowledge that I am being charged a \$30.00 handling of choosing the second option, submit payment of the \$30.00 handling.	act (House Bill 2032), I have provided the following to the surface pocated: 1) a copy of the Form C-1, Form CB-1, Form CB-1, Form T-1, or Form peing filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address. Cocknowledge that, because I have not provided this information, the mer(s). To mitigate the additional cost of the KCC performing this fee, payable to the KCC, which is enclosed with this form. If the fee is not received with this form, the KSONA-1 will be returned.