

For KCC Use: **7-28-10**
Effective Date: **7-28-10**
District #: **2**
SGA? ☒ Yes ☐ No

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

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JUL 22 2010

Form C-1
March 2010
Form must be Typed
Form must be Signed
All blanks must be Filled

NOTICE OF INTENT TO DRILL

KCC WICHITA

Must be approved by KCC five (5) days prior to commencing well
Form KSONA-1, Certification of Compliance with the Kansas Surface Owner Notification Act, MUST be submitted with this form.

Expected Spud Date: **07** month **27** day **2010** year

OPERATOR: License# **33936**
Name: **CHARLES N. GRIFFIN**
Address 1: **P.O. Box 347**
Address 2: _____
City: **Pratt** State: **KS** Zip: **67124** + _____
Contact Person: **Charles N. Griffin**
Phone: **720-490-5648**
CONTRACTOR: License# **33549**
Name: **LANDMARK DRILLING LLC**

Well Drilled For: Well Class: Type Equipment:

☒ Oil ☐ Enh Rec ☒ Infield ☒ Mud Rotary
☒ Gas ☐ Storage ☐ Pool Ext. ☐ Air Rotary
☐ Disposal ☐ Wildcat ☐ Cable
☐ Seismic; # of Holes ☐ Other _____
☐ Other: _____
☐ If OWWO: old well information as follows: _____

Operator: _____
Well Name: _____
Original Completion Date: _____ Original Total Depth: _____

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

Spot Description: **175' E. of**
NW - NW - SW Sec. **31** Twp. **33** S. R. **8** ☐ E ☒ W
(10/10/10) **2,310** feet from ☐ N / ☒ S Line of Section
505 feet from ☐ E / ☒ W Line of Section

Is SECTION: ☒ Regular ☐ Irregular?

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

County: **Harper**
Lease Name: **Dena** Well #: **1**
Field Name: **Hibbard North East**

Is this a Prorated / Spaced Field? ☐ Yes ☒ No

Target Formation(s): **Mississippian**

Nearest Lease or unit boundary line (in footage): **330'**

Ground Surface Elevation: **1284** 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: **120**

Depth to bottom of usable water: **180**

Surface Pipe by Alternate: ☒ I ☐ II

Length of Surface Pipe Planned to be set: **200+**

Length of Conductor Pipe (if any): _____

Projected Total Depth: **5100**

Formation at Total Depth: **Arbuckle**

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: _____

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 to the best of my knowledge and belief.

Date: **7/22/10** Signature of Operator or Agent: _____ Title: **Agent**

For KCC Use ONLY

API # 15 - **077- 21692-00-00**
Conductor pipe required **NONE** feet
Minimum surface pipe required **200** feet per ALT. ☒ I ☐ II
Approved by: **SB 7-23-10**
This authorization expires: **7-23-11**
(This authorization void if drilling not started within 12 months of approval date.)
Spud date: _____ Agent: _____

Remember to:

- File Certification of Compliance with the Kansas Surface Owner Notification Act (KSONA-1) with Intent to Drill;
- 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 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

31 33 8 ☐ E ☒ W

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API # 15 -

077-21692-00-00

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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: CHARLES N. GRIFFINLease: DenaWell Number: 1Field: Hibbord North East

Number of Acres attributable to well: _____

QTR/QTR/QTR/QTR of acreage: _____ - NW - NW - SW

Location of Well: County: Harper2,310

feet from

☐ N

/

☒ S

Line of Section

505

feet from

☐ E

/

☒ W

Line of Section

Sec. 31Twp. 33S. R. 8☐ E

/

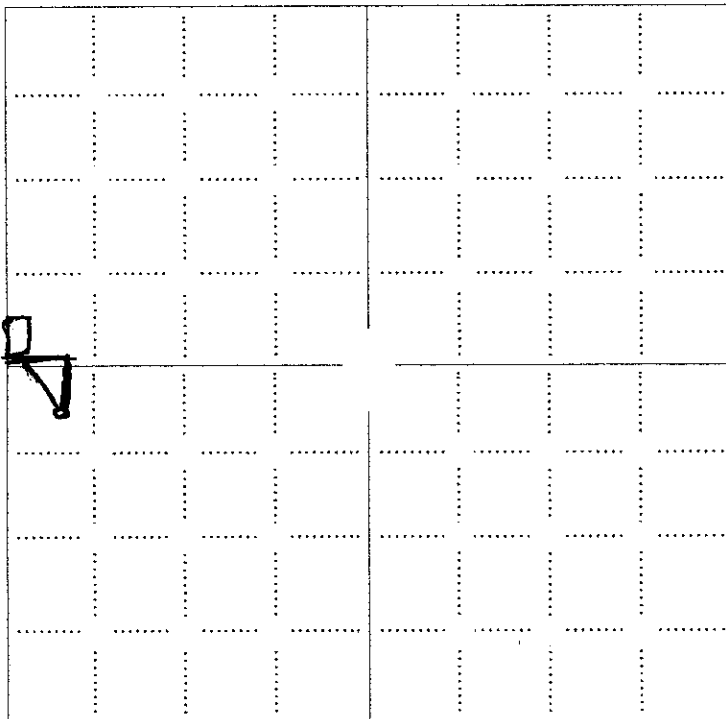
☒ WIs Section: ☒ Regular or ☐ Irregular

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

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

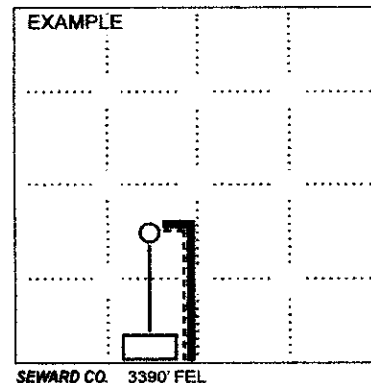
PLAT

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.



LEGEND

- ☐ Well Location
- ☐ Tank Battery Location
- ☐ Pipeline Location
- ☐ Electric Line Location
- ☐ Lease Road Location



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

505' FUL

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

- 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.
- The distance of the proposed drilling location from the south / north and east / west outside section lines.
- 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: (CO-7 for oil wells; CG-8 for gas wells).
- The predicted locations of lease roads, tank batteries, pipelines, and electrical lines.

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OIL & GAS CONSERVATION DIVISION

JUL 22 2010

Form KSONA-1

July 2010

Form Must Be Typed

Form must be Signed

All blanks must be Filled

KCC WICHITA
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 # 33936
Name: CHARLES N. GRIFFIN
Address 1: P.O. Box 347
Address 2: _____
City: Pratt State: KS Zip: 67124 + _____
Contact Person: Charles N. Griffin
Phone: (720) 490-5648 Fax: (620) 680-1262
Email Address: _____

Well Location: _____
NW NW SW Sec. 31 Twp. 33 S. R. 8 ☐ East ☒ West
County: Harper
Lease Name: Dena Well #: 1

If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:

Surface Owner Information:

Name: Diel Farms LLC / C/O Brent Diel
Address 1: 212 Coats Street
Address 2: _____
City: Kiowa State: KS Zip: 67070 + _____

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.

If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.

Select one of the following:

☒ I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address.

☐ I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.

If choosing the second option, submit payment of the \$30.00 handling fee with this form. If the fee is not received with this form, the KSONA-1 form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-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: 7/22/10 Signature of Operator or Agent: _____ Title: Agent

15-017-21672-00-00

GRIFFIN MANAGEMENT, LLC
DENA LEASE
SW 1/4, SECTION 31, T33S, R0W
HARPER COUNTY, KANSAS

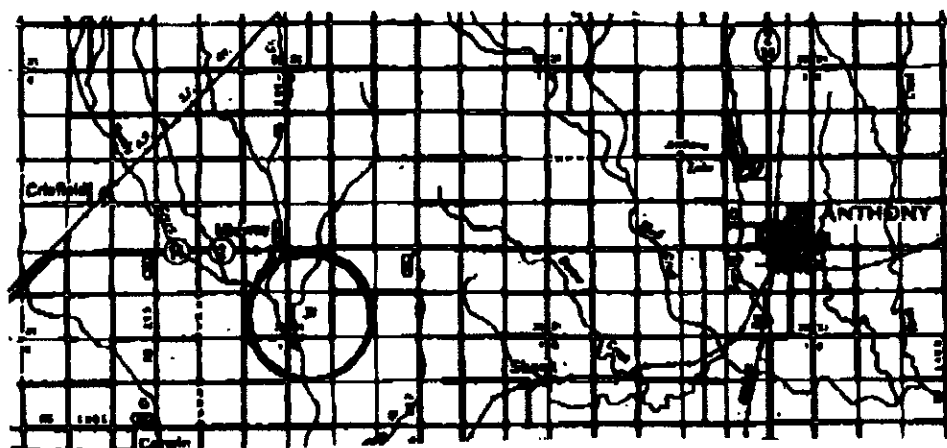
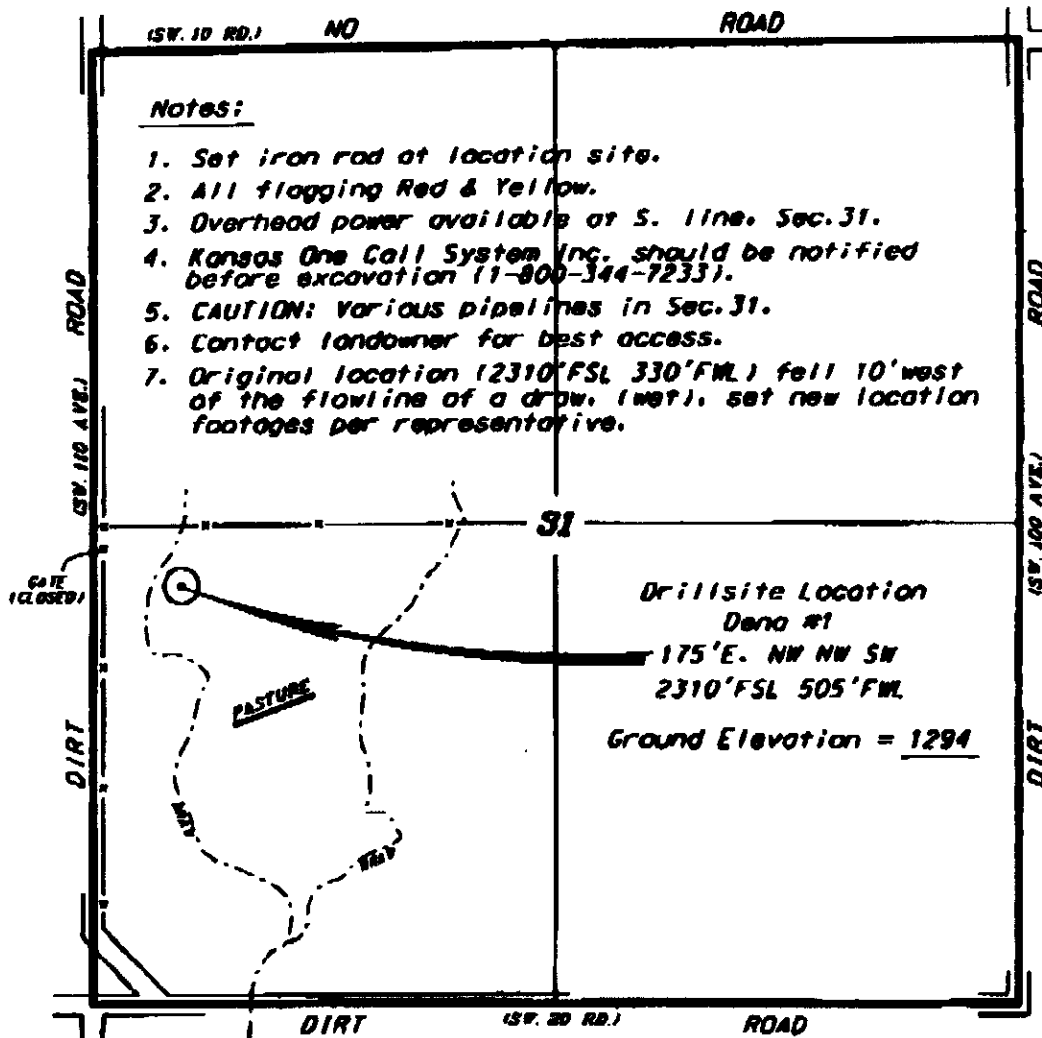
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Notes:

1. Set iron rod at location site.
2. All flagging Red & Yellow.
3. Overhead power available at S. line, Sec. 31.
4. Kansas One Call System Inc. should be notified before excavation (1-800-344-7233).
5. CAUTION: Various pipelines in Sec. 31.
6. Contact landowner for best access.
7. Original location (2310' FSL 330' FWL) fell 10' west of the flowline of a draw. (wet). set new location footages per representative.



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Date July 9, 2010


CENTRAL KANSAS OILFIELD SERVICES, INC. (800) 798-1977

15-077-21692-00-00

**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: CHARLES N. GRIFFIN		License Number: 33936	
Operator Address: P.O BOX 347		Pratt	Kansas
Contact Person: Charles N. Griffin		Phone Number: 720-490-5648	
Lease Name & Well No.: Dena #1		Pit Location (QQQQ): <div style="display: flex; justify-content: space-between;"> NW NW SW </div>	
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)</small>		Pit is: <input checked="" type="checkbox"/> Proposed <input type="checkbox"/> Existing If Existing, date constructed: _____ Pit capacity: _____ (bbls)	
Is the pit located in a Sensitive Ground Water Area? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Chloride concentration: _____ mg/l <small>(For Emergency Pits and Settling Pits only)</small>	
Is the bottom below ground level? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Artificial Liner? <input type="checkbox"/> Yes <input type="checkbox"/> No	
How is the pit lined if a plastic liner is not used?		Sec. <u>31</u> Twp. <u>33</u> R. <u>8</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>2,310</u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>505</u> Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section HARPER County	
Pit dimensions (all but working pits): _____ Length (feet) _____ Width (feet) <input checked="" type="checkbox"/> N/A: Steel Pits Depth from ground level to deepest point: _____ (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.	
		<div style="border: 1px solid black; padding: 5px; width: fit-content; margin: auto;"> RECEIVED JUL 23 2010 KCC WICHITA </div>	
Distance to nearest water well within one-mile of pit _____ 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: _____ Number of working pits to be utilized: <u>1</u> Abandonment procedure: _____ 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>7-23-10</u> Date		 Signature of Applicant or Agent	
<div style="display: flex; justify-content: space-between;"> KCC OFFICE USE ONLY Steel Pit <input checked="" type="checkbox"/> RFAC <input checked="" type="checkbox"/> RFAS <input type="checkbox"/> </div>			
Date Received: <u>7-23-10</u> Permit Number: _____ Permit Date: <u>7-23-10</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

15-077-21692-00-00