For KCC Use:	8-3-2010
Effective Date: _	0 3-2010
District #	2
SGA2 Two	₩ _{No}

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

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

SGA? Yes No			NOTICE OF	INTENT TO DRILL	Form must be typed
Form VF	ONA 4 Considerati	Must be	approved by KCC	five (5) days prior to commencing well	All blanks must be Filled
roini Ka	ONA-1, Ceruncau	on or Gomj	Diance with the Kan	sas Surface Owner Notification Act, MUST be submitted	with this form.
Expected Spud Date:	8	20	2010	Spot Description:	
	month	day	year	SE NW SW - NW Sec. 31 Twp.	17 s p 10
OPERATOR: License#	7383 🗸			(2/2/20) 1,950 teet from	N / S Line of Soction
Name: Grady Bolding C	orporation			563 feet from	E / W Line of Section
Address 1: P.O. Box 486	3			Is SECTION: Regular Irregular?	
Address 2:					
		S Zip: _	67526 +	(Note: Locate well on the Section Pla County: Ellsworth	ıt on reverse side)
Contact Person: Grady E	Bolding				26
Phone: 620-564-2240				Field Name: Bloomer	Well #: 26
CONTRACTOR: License#	33350				
Name: Southwind Drilling				Is this a Prorated / Spaced Field? Tagget Farmering (2) Arbuckle	Yes ∑No
MAR DON A CO.				Target Formation(s): Arbuckle	560
Well Drilled For:	Weil Class		pe Equipment:	Nearest Lease or unit boundary line (in footage): Ground Surface Elevation: 1812'	
ZOII Enh F			Mud Rotary		feet MSL
Gas Stora	* >	-	Air Rotary	Water well within one-quarter mile:	Yes X No
Dispo	J	ıt L	Cable	Public water supply well within one mile: Depth to bottom of fresh water: 150'	Yes No
Seismic;# o	of HolesOther			Depth to bottom of usable water: 288 350	The state of the s
Oniei				Surface Pipe by Alternate:	
ff OWWO: old well	information as follo	ws:		Length of Surface Pipe Planned to be set: 325'	
Operator:					
Well Name:				Projected Total Depth: 3325'	***
Original Completion Da			al Depth:	Formation at Total Depth: Arbuckle	**************************************
,			·	Water Source for Drilling Operations:	
Directional, Deviated or Hor	rizontal wellbore?		Yes∑No	Well X Farm Pond Other:	
If Yes, true vertical depth:				DWR Permit #:	
Bottom Hole Location:				(Note: Apply for Permit with E	WR ()
KCC DKT #:				Will Cores be taken?	Yes ⊠No
				If Yes, proposed zone:	
			Δ	FFIDAVIT	
The undersigned hereby a	affirms that the dri	lling, comp		plugging of this well will comply with K.S.A. 55 et. seq.	
It is agreed that the follow					
Notify the appropria					
2. A copy of the appro				ich drilling rig:	
3. The minimum amou	ant of surface pipe	as specifi	ed below <i>shall be s</i>	et by circulating cement to the top; in all cases surface	pipe shall be set
through all unconso	lidated materials	plus a mini	mum of 20 feet into	the underlying formation.	
4. If the well is dry hole	e, an agreement t	etween th	e operator and the d	istrict office on plug length and placement is necessary	prior to plugging;
6. If an ALTERNATE II	COMPLETION	roduction	ore well is either plu nine shall be cemen	gged or production casing is cemented in; ted from below any usable water to surface within 120	DAVC of anual data
Or pursuant to Appe	endix "B" - Easter	Kansas s	urface casing order	#133,891-C, which applies to the KCC District 3 area, a	alternate II cementing
must be completed	within 30 days of	the spud d	ate or the well shall	be plugged. In all cases, NOTIFY district office prior	to any cementing.
hereby certify that the sta	atements made he	erein are tr	ue and to the best of	f my knowledge and belief.	
07/07/40			9 1	J/ Kall	side at
Date: 07/27/10	Signature of	Operator of	or Agent:/ 🗗	toy lording Title: FIE:	sident
Ear MOO Har ONLY				Remember to:	
For KCC Use ONLY	21248-0	717		- File Certification of Compliance with the Kansas Su	rface Owner Notification
API # 15- 0507	1. /			Act (KSONA-1) with Intent to Drill;	
Conductor pipe required	None		eet	- File Drill Pit Application (form CDP-1) with Intent to	
Minimum surface pipe requ	uired 3. 3)fee	t per ALT.	- File Completion Form ACO-1 within 120 days of spu	
4 ' ' 4 '	7-29-2010		" ليسل " ليبين ٥٠٠ - ١٠٠ ،	 File acreage attribution plat according to field prorat Notify appropriate district office 48 hours prior to wo 	on orders;
. , ,	7 20 20	1/		Submit plugging report (CP-4) after plugging is com	
This authorization expires: (This authorization void if dri			s of approval date.)	Obtain written approval before disposing or injecting	
	J			- If well will not be drilled or permit has expired (See:	
Spud date:	Agent:			please check the box below and return to the address	
	<u> </u>			Well will not be drilled or Permit Expired D	ate:
Mail to:	KCC - Conservat	ion Divisi	on.	Signature of Operator or Agent:	ate:
	Room 2078, Wic		•		RECFIVER
	•				

JUL 2 8 2010

For KCC Use ONLY API # 15 - 053-21248-00-00

IN ALL CASES PLOT THE INTENDED WELL ON THE PLAT BELOW

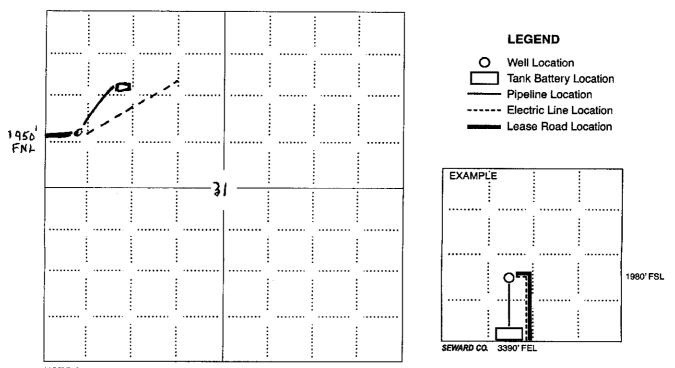
in all cases, please fully complete this side of the form. Include items 1 through 5 at the bottom of this page.

Operator: Grady Bolding Corporation Lease: Grizzell Well Number: 26	Location of Well: County: Ellsworth 1,950
Field: Bloomer	Sec. 31 Twp. 17 S. R. 10 E X W
Number of Acres attributable to well; 20 QTR/QTR/QTR/QTR of acreage: SW - 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. 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.



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

563' FW

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.
- 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.

RECEIVED

JUL 2 8 2010

Kansas Corporation Commission Oil & Gas Conservation Division

Form CDP-1 May 2010 Form must be Typed

APPLICATION FOR SURFACE PIT

Submit in Duplicate

Operator Name: Grady Bolding Corporation			License Number: 7383	
Operator Address: P.O. Box 486			Ellinwood KS 67526	
Contact Person: Grady Bolding			Phone Number: 620-564-2240	
Lease Name & Well No.: Grizzell	#2	6	Pit Location (QQQQ);	
Type of Pit:	Pit is:		<u>SW</u> . <u>NW</u>	
Emergency Pit Burn Pit	X Proposed	Existing	Sec. 31 Twp. 17 R. 10 East X West	
Settling Pit X Drilling Pit	If Existing, date co	nstructed:	1,950 Feet from X North / South Line of Section	
Workover Pit Haul-Off Pit (If WP Supply API No. or Year Drilled)	Pit capacity: 1,500	(bbls)		
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? XYes No	Artificial Liner?	No .	How is the pit lined if a plastic liner is not used? Natural and Chemical mud	
Pit dimensions (all but working pits):7	D Length (fee m ground level to dee	•	Width (feet) N/A: Steel Pits No Pit	
If the pit is lined give a brief description of the line material, thickness and installation procedure.		liner integrity, in	dures for periodic maintenance and determining cluding any special monitoring. around pit for leakage	
Distance to nearest water well within one-mile of	f pit:	Depth to shallow Source of inform	vest fresh water80 feet.	
1639 feet Depth of water well	165 feet	measured	well owner electric log KDWR	
Emergency, Settling and Burn Pits ONLY:		Drilling, Worko	ver and Haul-Off Pits ONLY:	
Producing Formation:		•••	utilized in drilling/workover: Chemical Mud	
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? Yes No		Number of working pits to be utilized: Allow to dry Fill subsoil in to nite		
		Abandonment procedure: followed by top soil on top of pits. Drill pits must be closed within 365 days of spud date.		
I hereby certify that the above statement	ents are true and corr	rect to the best of r	ny knowledge and belief.	
07/27/2010 Date		Thu Sig	Bully nature of Applicant or Agent	
	ксс	OFFICE USE ON	ILY Liner Steel Pit RFAC RFAS	
Date Received: 7-25-10 Permit Numb	er:	Permit		

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

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JUL 2 8 2010

15-053-21248-000

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

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.

7383	
OPERATOR: License # 7383 Name: Grady Bolding Corporation	Well Location:
Name: Grady Bolding Corporation	
Address 1: P.O. Box 486	County: Ellsworth
Address 2:	Lease Name: Grizzell Well #: 26
City: Ellinwood State: KS Zip: 67526 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of
Contact Person: Grady Bolding	the lease below:
Phone: (620) 564-2240 Fax: (620) 564-2765	
Contact Person: Grady Bolding Phone: (620) 564-2240 Fax: (620) 564-2765 Email Address: grady@hbcomm.net	
Surface Owner Information: Name: Merlin Stoss	When filing a Form T-1 involving multiple surface owners, attach an additional
Address 1: 739 NE 30 Road	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
Name: Metin Stoss Address 1: 739 NE 30 Road Address 2: City: City: Great Bend State: KS Zip: 67530 +	county, and in the real estate property tax records of the county treasurer.
City: Great Bend State: KS Zin: 67530 +	
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cath	odic Protection Borehole Intent), you must supply the surface owners and
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cath the KCC with a plat showing the predicted locations of lease roads, tar	odic Protection Borehole Intent), you must supply the surface owners and nk batteries, pipelines, and electrical lines. The locations shown on the plat on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cath the KCC with a plat showing the predicted locations of lease roads, tar are preliminary non-binding estimates. The locations may be entered a Select one of the following: I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be	Act (House Bill 2032), I have provided the following to the surface located: 1) a copy of the Form C-1, Form CB-1, the platty as a separate plat may be submitted.
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cath the KCC with a plat showing the predicted locations of lease roads, tar are preliminary non-binding estimates. The locations may be entered a Select one of the following: I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be 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, and I have not provided this information to the surface owner(s). It	Act (House Bill 2032), I have provided the following to the surface located: 1) a copy of the Form C-1 or Form CB-1, the plat(s) required by this and email address. acknowledge that, because I have not provided this information, the wner(s). To mitigate the additional cost of the KCC performing this
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cath the KCC with a plat showing the predicted locations of lease roads, tar are preliminary non-binding estimates. The locations may be entered a Select one of the following: I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be CP-1 that I am filling in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax, if I have not provided this information to the surface owner(s). If KCC will be required to send this information to the surface of task, I acknowledge that I am being charged a \$30.00 handling.	Act (House Bill 2032), I have provided the following to the surface located: 1) a copy of the Form C-1 or Form CB-1, the plat(s) required by this and email address. acknowledge that, because I have not provided this information, the wner(s). To mitigate the additional cost of the KCC performing this gree, payable to the KCC, which is enclosed with this form.
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cath the KCC with a plat showing the predicted locations of lease roads, tar are preliminary non-binding estimates. The locations may be entered a Select one of the following: I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be CP-1 that I am filling in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax, if I have not provided this information to the surface owner(s). If KCC will be required to send this information to the surface of task, I acknowledge that I am being charged a \$30.00 handling.	Act (House Bill 2032), I have provided the following to the surface located: 1) a copy of the Form C-1, Form CB-1, Form CB-1, Form T-1, or Form I being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address. acknowledge that, because I have not provided this information, the wner(s). To mitigate the additional cost of the KCC performing this g 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.

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