SEP 03 2010

| Must be approved by KCC five () days prior to commencing well Form KSONA-1, Certification of Compliance with the Kansas Surface Owner Horitication Act MIST be submitted with this form. | / ~ x ~ | DRATION COMMISSION NSERVATION DIVISION KCC WICHITA March 2010 Mar |
|---|--|--|
| Expected Sparid Date: Sepected Sparid Date: 9 | SGA? Yes NOTICE OF I | NTENT TO DRILL All blanks must be Filled |
| PREATOR: Leanese Name Bradley Oil Co. Address 1: P. O. Box 21614 Name Bradley Oil Co. Address 2: Cry CkLabotte Cit Ey Sure: OK 20: 73156* Crowd Contract Penon: A05 823 8136 Crowd Cit Expense: Ok 20: 73156* Crowd Cit Expense: | Form KSONA-1, Certification of Compliance with the Kansa | s Surface Owner Notification Act, MUST be submitted with this form. |
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| Section Sect | Exposite oper outs. | opot bescription. |
| OPERATOR: Learness 318.47 Name Pared Lev Oil Co. Ascrises 1: P. O. Box 21614 Ascrises 2: Dity Cit (Althoma City Sate: Oil 20: 7-3156* City Cit (Althoma City Sate: Oil 20: 7-3156* City City City City City Sate: Oil 20: 7-3156* Contract Person: Bradd Schreartz Phone: 405-823.8136 COUNTY-TORK Learness 33.734 Name: Hat Drilling Well Crises: Sate Received Person: Well Case: Well of the County Process of the County Process of the County Sate Received Person: Well of the County Process of the County Sate Received Person: Well of County | | ODDON'S TO THE TOTAL THE TALL |
| Name | OPERATOR: License# 31847 | feet from N / XX S Line of Section |
| Address 2: Contact Person: Bradd Schwartz Contact Person: A05 823 8136 CONTRACTOR: Leases 33734 Name: Halt Drilling Well Critic For: Well & Latting Persons (Latting Persons) State Office For: Well & Latting Contact Persons (Latting Persons) Well Critic For: Well & Latting Contact Persons (Latting Persons) Salarinic: # of holes Contact Persons Salarini | Name: Bradley Oil Co. | reet non XX C / W cine of Section |
| County: | Address 1: P. O. Box 21614 | Is SECTION: X Regular Imegular? |
| Convox. Lathorna. C3.LV_State. OK. 270: 731.56+ Contract Person: 405. 823. 81.36 Chromat Person: 4 | Address 2: | - (Note: Locate well on the Section Plat on reverse side) |
| Contact Person: Stract Schwarts Solid Sol | | · _ · |
| Pince: 405-821-81-96 Name: 410-821-81-96 Name: 41 | | |
| Second Process 33734 Second Picker Sec | Phone: 405 823 8136 | Field Name: Longanecker Southeast |
| Name: Name: Well Drilled For: Well Class: Type Equipment Target Formation(s): Bart Lesville 29 Teet MSL MSL | CONTRACTOR: Licensett 33734 | |
| Nearest Lease or unit boundary line (in footage): 29 feet MSL | 30.00 | |
| Special properties Strange Str | Holle. | |
| Sales Scorage Soles So | Well Drilled For: Well Class: Type Equipment: | 1000 |
| Public water supply well within one mile: See No Debre | Oil XXEnh Rec X Infield X Mud Rotary | |
| Seismic | Gas Storage Pool Ext. Air Rotary | |
| Seattifies For notice Depth to bottom of usable water: 260.500 | Disposal Wildcat Cable | 400 |
| From the content of | Seismic; # of Holes Other | |
| Comparison | Other: | — |
| Direction: Departs: Criginal Completion Date: Original Total Depth: Projected Total Depth: Source for Original Completion Date: Original Total Depth: Projected Total Depth: Source for Original Operations: Maint Source for Original Operations: Source for Original Operations: Water Source for Original Operation or Original Operation of Operator or Agent: Price Original Operation | The Charles of the state of the | 00 5. |
| Well Name: Original Completion Date: Original Total Depth: Original Completion Date: Original Co | TOVVVO: Old well information as follows. | |
| Original Completion Date: Original Total Depth: Formation at Total Depth: Bartlesville Water Source for Drilling Operations: Water So | Operator: | |
| Directional, Deviated or Horizontal wellbore? Yes x No Water Source for Orilling Operations: Water Source for Orilling | | Projected Total Depth: 900 |
| Directional, Deviated or Horizontal welltore? If Yes, true vertical depth: DWR Permit #: DWR Permit #: | Original Completion Date: Original Total Depth: | |
| If Yes, true vertical depth: DWR Permit #: (Note: Apply for Permit with DWR Yes Yes | | Water Source for Drilling Operations: |
| Bottom Hole Location: (Nate: Apply for Permit with DWR Yes Note: Apply for Permit with Subject Yes Note: Apply for Permit with DWR Yes Note: Apply for Permit Wash Dward Yes Note: Apply for Permit Permit with DWR Yes Note: Apply for Permit Permit with DWR Yes Note: Apply for Permit Permit Permit with Dward Yes Note: Apply for Permit Permit Permit Permit Permit Permit Permit | | Well Farm Pond XXOther: |
| 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 pipe leight 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 the Statements Manass surface casing order \$133.891-C, which applies to 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. It hereby certify that the statements made herein are true and to the best of my knowledge and bellef. Date: 9-1-10 Signature of Operator or Agent: For KCC Use ONLY API # 15 - 091 - 23 4/23 - 000 Signature of Operator or Agent: File Conflication of Compliance with the Kansas Surface Owner Notification Act (KSOA-1) with Intent to Drill; File Drill Pit Application (form CDP-1) with Intent to Drill; File Drill Pit Application (form 4b hours prior to workover or re-entry; Submit plugging report (4-9) after plugging is completed (within 60 days); Notify appropriate district office at 8 hours prior to workover or re-entry; Submit plugging report (4-9) after plugging is completed (within 60 days); Well will not be drilled or permit Expi | | |
| 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 KCD 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 bellef. For KCC Use ONLY API # 15 . O91 - 23 4/13 - 00 - 00 Conductor pipe required | | - (Note: Apply for Permit with DWR |
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| I hereby certify that the statements made herein are true and to the best of my knowledge and belief. Date: 9-1-10 Signature of Operator or Agent: Brown Agent: | 6. If an ALTERNATE II COMPLETION, production pipe shall be cement | ted from below any usable water to surface within 120 DAYS of spud date. |
| Title: Particular Particu | | |
| Date: | | · · · · · · · · · · · · · · · · · · · |
| For KCC Use ONLY API # 15 | I hereby certify that the statements made herein are true and to the best of | my knowledge and belief. |
| For KCC Use ONLY API # 15 | 9-1-10 BLA | de a Schratt - Landert |
| For KCC Use ONLY API # 15 | Date: Signature of Operator or Agent: | Title: Track |
| API # 15 | Far VCC Han ONLY | Remember to: |
| Conductor pipe required | | - File Certification of Compliance with the Kansas Surface Owner Notification |
| Minimum surface pipe required | | 1 1 |
| Minimum surface pipe required | Conductor pipe required None feet | l |
| Approved by: LWM 9-3-2010 This authorization expires: 9-3-2011 (This authorization void if drilling not started within 12 months of approval date.) Spud date: Agent: Mail to: KCC - Conservation Division, See authorization or plant according to field profration 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: | | I INC. |
| This authorization expires: | William Surface pipe required | I - I - I - I - I - I - I - I - I - I - |
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| Spud date: Agent: please check the box below and return to the address below Mell will not be drilled or Permit Expired Date: Signature of Operator or Agent: Signature of Operator or Agent: | (ттнь адилопизаціон усно іт отнініпд пот started within 12 months of approval date.) | - If well will not be drilled or permit has expired (See: authorized expiration date) |
| Well will not be drilled or Permit Expired Date: Signature of Operator or Agent: | Could date: Agest: | please check the box below and return to the address below. |
| Mail to: KCC - Conservation Division, | opuu uateAgent | |
| | Matter 1/00 Occasional - Military | |
| * * * * * * * * * * * * * * * * * * * | Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202 | |

For KCC Use ONLY
API # 15 - 091-23423-00-00

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: Br. Lease: Well Number: | | G. Gil | lespie | | | of Well: County: 3931 909 30 Twp. | feet fromfeet from 14 S. R | ⊠ E / 🛄 ∨ | Line of Section United Section White Way |
|-------------------------------------|-----------------------------|----------------------------------|--|-------------------------------|--|--|----------------------------|---|--|
| Number of Acres a QTR/QTR/QTR/QT | ttributable to | well: e: <u>NE</u> | 4.4 NW . SE | - NE | | on is irregular, locorner used: | | nearest corner | boundary. |
| lease r | Show location oads, tank ba | on of the well atteries, pipe | l. Show footage to blines and electrica You me | the nearest I lines, as re | LAT lease or unit in quired by the reparate plat in | Kansas Surface C | Owner Notice A | ct (House Bill 20 | 932). |
| | | | | | 0 | | O Wel | GEND I Location K Battery Location ctric Line Location | tion |
| | | | 30 | | | | XAMPLE | se Road Loca | tion |
| | | | | | | | | | 1980' FSL |
| | | | , | | | | WARD CO. 3390' 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, 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 ECEIVED CG-8 for gas wells).
- 5. The predicted locations of lease roads, tank batteries, pipelines, and electrical lines.

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

SEP 0 3 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: Bradley Oil Co. | | | License Number: 31847 | | | | |
|--|------------------------|---|--|--|--|--|--|
| Operator Address: P. O. Box 21614 | | | | | | | |
| Contact Person: Bradd Schwartz | | | Phone Number: 405 823-8136 | | | | |
| Lease Name & Well No.: - Gillespie 1-11 | | | Pit Location (QQQQ): | | | | |
| Type of Pit: | Pit is: | | NE NU SE NE | | | | |
| Emergency Pit Burn Pit | XX Proposed | Existing | Sec. 30 Twp. 14 R. 22 XX East West | | | | |
| Settiing Pit XX Drilling Pit | If Existing, date cor | nstructed: | 3931 Feet from North /XX South Line of Section | | | | |
| Workover Pit Haul-Off Pit (If WP Supply API No. or Year Drilled) | Pit capacity: | | Feet from XX East / West Line of Section | | | | |
| | 60 | (bbls) | JohnsonCounty | | | | |
| Is the pit located in a Sensitive Ground Water A | \rea? Yes XX | No . | Chloride concentration: n/a mg/l (For Emergency Pits and Settling Pits only) | | | | |
| Is the bottom below ground level? | Artificial Liner? | | How is the pit lined if a plastic liner is not used? | | | | |
| xxx Yes No | Yes X | | natural clays prevent migration | | | | |
| Pit dimensions (all but working pits): | | | Width (feet) N/A: Steel Pits | | | | |
| Depth fro | om ground level to dee | • | | | | | |
| 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. | | | | | | | |
| none | | | none | | | | |
| Distance to nearest water well within one-mile of pit: | | Depth to shallowest fresh water 100 40 feet. Source of information: | | | | | |
| none عری feet Depth of water well 131 feet | | measured well owner X electric log KDWR | | | | | |
| Emergency, Settling and Burn Pits ONLY: | | Drilling, Workover and Haul-Off Pits ONLY: | | | | | |
| Producing Formation: | | Type of materia | al utilized in drilling/workover: <u>fresh water</u> | | | | |
| Number of producing wells on lease: | | Number of wor | king pits to be utilized: one | | | | |
| Barrels of fluid produced daily: | | Abandonment procedure: <u>air dry and fill in with</u> backhoe | | | | | |
| Does the slope from the fank battery allow all s flow into the pit? Yes No | pilled fluids to | Drill pits must t | pe 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. | | | | | | | |
| 9-1-10 Bull a Solut SEP 0 3 2010 | | | | | | | |
| Date Signature of Applicant or Agent KCC WICHITA | | | | | | | |
| KCC OFFICE USE ONLY Liner Steel Pit RFAC RFAS | | | | | | | |
| Date Received: 9-3-10 Permit Num | nber: | Perm | it Date: 9-3-10 Lease Inspection: Yes 🗷 No | | | | |



NOTICE TO OPERATORS FILING INTENT TO DRILL FOR DISPOSAL OR ENHANCED RECOVERY INJECTION WELLS, (CLASS II INJECTION WELL)

The attached approved Notice of Intent to Drill indicates the proposed well is to be used for injection. An approved "Intent to Drill" does not approve injection authority as a Class II Injection Well in Kansas.

Before any well is used for injection purposes, the operator must file an application for injection authority in accordance with K.A.R. 82-3-401 and provide notice in accordance with K.A.R. 82-3-402. The Conservation Division must issue a written permit granting the application before commencement of injection.

The Conservation Division requirements and restrictions associated with Class II Injection are identified in **K.A.R. 82-3-400 et seq** of our regulations. Associated regulations governing drilling, completion and injection applications may be found in K.A.R. 82-3-135, Table I, Table II, in the Cedar Hills Sandstone Moratorium, (Docket #156,397-C), and the Eastern Kansas Surface Casing Order, (Docket #133,891-C).

If you have questions regarding the approval of injection authority, an injection application may be filed as a "Design Approval" before actual drilling and completion of the well occurs. If you have any questions or concerns regarding Class II injection wells or regulations, call the Underground Injection Control Department at 316-337-6200.

Failure to obtain commission approval before beginning injection is punishable by a penalty, shut-in of the well or both.

15-091-23423-00-00 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.

| OPERATOR: License # | NE NW SE NE Sec. 30 Twp.14 S. R.22 X Eas West | | | | | |
|--|---|--|--|--|--|--|
| Address 2: | Lease Name: Gillespie Well#: 1-11 | | | | | |
| City: Oklahoma Citystate: OK Zip: 73156 + | If filing a Form T-1 for multiple wells on a lease, enter the legal description of | | | | | |
| Contact Person: Bradd Schwartz | the lease below: | | | | | |
| Phone: (405) 823-8136 Fax: () | · - | | | | | |
| Email Address: | - | | | | | |
| Surface Owner Information: | | | | | | |
| Name: Paul & Tula Gillespie | | | | | | |
| Address 1: 18595 S. Edgerton Rd. | 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: | | | | | | |
| City: Fdgerton State: KS Zip: 66021 + | - | | | | | |
| the KCC with a plat showing the predicted locations of lease roads, ta | hodic Protection Borehole Intent), you must supply the surface owners and ank batteries, pipelines, and electrical lines. The locations shown on the plat if on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. | | | | | |
| owner(s) of the land upon which the subject well is or will be | e Act (House Bill 2032), I have provided the following to the surface e located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form m being filed is a Form C-1 or Form CB-1, the plat(s) required by this , and email address. | | | | | |
| KCC will be required to send this information to the surface | I acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this ing 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 C | ng fee with this form. If the fee is not received with this form, the KSONA-1 P-1 will be returned. | | | | | |
| I hereby certify that the statements made herein are true and correct | | | | | | |
| Date: 9-40 Signature of Operator or Agent: Bull | Il a Solf Title: Prendet | | | | | |

RECEIVED