# For KCC Use: /2-13-2010 Effective Date: /3 District # XNo

#### KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

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

#### NOTICE OF INTENT TO DRILL

Must be approved by KCC five (5) days prior to commencing well

Continuation of Compliance with the Kansas Surface Owner Notification Act, MUST be submitted with this form.

Expected Spud Date: 12/13/2010	Spot Description:	
month day year	SW _ SE _ NE _ NE Sec. 3 Twp. 31 S. R	14
33365	(Q/Q/Q/Q) 1,115 feet from N /	
OPERATOR: License# Name: Layne Energy Operating, LLC		W Line of Section
Address 1: 1900 Shawnee Mission Parkway	Is SECTION: Regular Irregular?	<b>_</b>
Address 2:		
City: Mission Woods State: KS Zip: 66205 + 2001	<ul> <li>(Note: Locate well on the Section Plat on reverse County: Montgomery</li> </ul>	ie side)
Contact Person: Victor H. Dyal		Well #: 1Q-3
Phone: 913-748-3960	Lease Name: Zook Field Name: Unnamed Lafon tains	vveii #: 1335
CONTRACTOR: License# 33606		
Name: Thomton Air Rotary, LLC	Is this a Prorated / Spaced Field? Target Formation(s): Cattleman Sands	Yes ∑No
Name.		,
Well Drilled For: Well Class: Type Equipment:	Nearest Lease or unit boundary line (in footage): 500'	f
◯ Oil	Ground Surface Elevation: 920	feet MSL
Gas Storage <b>∑</b> P <del>ool Ex</del> t. ∑Air Rotary	Water well within one-quarter mile:	Yes No
Disposal Wildcat Cable	Public water supply well within one mile:	Yes [X]No
Seismic ; # of HolesOther	Depth to bottom of fresh water: 150'	
Other:	Depth to bottom of usable water: 175'	
If OWWO: old well information as follows:	Surface Pipe by Alternate: Surface Pipe Planned to be set: 20'	RECEIVED
	Length of Ourlace I fpc I families to oc set.	
Operator:	Length of Conductor Pipe (if any): None Projected Total Depth: 1300'	DEC 0.7 2010
Well Name:	Formation at Total Depth: Mississippian	
Original Completion Date: Original Total Depth:		KCC WICHIT
Directional, Deviated or Horizontal wellbore?	Water Source for Drilling Operations:  Well Farm Pond Other:	IVOC ANICIBII
If Yes, true vertical depth:		<del></del>
Bottom Hole Location:	DWR Permit #:(Note: Apply for Permit with DWR	
KCC DKT #:	Will Cores be taken?	Yes No
	If Yes, proposed zone:	
	FFIDAVIT	
The undersigned hereby affirms that the drilling, completion and eventual p	olugging of this well will comply with K.S.A. 55 et. seq.	
It is agreed that the following minimum requirements will be met:		
<ol> <li>Notify the appropriate district office prior to spudding of well;</li> </ol>		
2. A copy of the approved notice of intent to drill <b>shall be</b> posted on each		. 11
<ol><li>The minimum amount of surface pipe as specified below shall be se through all unconsolidated materials plus a minimum of 20 feet into t</li></ol>	, ,	III De Set
If the well is dry hole, an agreement between the operator and the di		o pluagina:
5. The appropriate district office will be notified before well is either plug	gged or production casing is cemented in;	
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.
Or pursuant to Appendix "B" - Eastern Kansas surface casing order a must be completed within 30 days of the spud date or the well shall to	#133,891-C, which applies to the KCC District 3 area, afternate	: II cementing
		emening.
I hereby certify that the statements made herein are true and to the best of	r my knowledge and peller.	
Date: 12/6/2010 Signature of Operator or Agent:	Title: Manager of	of Engineering
Organization of Operation of Agents		
For KCC Use ONLY	Remember to:	
API # 15- 125-32023-00-00	<ul> <li>File Certification of Compliance with the Kansas Surface Ow Act (KSONA-1) with Intent to Drill;</li> </ul>	mer Notification 🚨
Mara	- File Drill Pit Application (form CDP-1) with Intent to Drill;	1
20	- File Completion Form ACO-1 within 120 days of spud date;	ယ္
Minimum surface pipe required	- File acreage attribution plat according to field proration orde	rs;
Approved by: Rust 12-8-2010	- Notify appropriate district office 48 hours prior to workover o	
This authorization expires: 12-8-2011	- Submit plugging report (CP-4) after plugging is completed (v	· · · · · · · · · · · · · · · · · · ·
(This authorization void if drilling not started within 12 months of approval date.)	- Obtain written approval before disposing or injecting salt wal	į
	<ul> <li>If well will not be drilled or permit has expired (See: authorize please check the box below and return to the address below</li> </ul>	11/71
Spud date: Agent:		m
	Well will not be drilled or Permit Expired Date: Signature of Operator or Agent:	
Mail to: KCC - Conservation Division.	digitature of Operator of Agent.	€

For KCC Use ONLY API#15. 125-32023-00-00

### 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.

		-	SE NE -		Location of Well: County: Montgomery  ///5 feet from PN / S Line of S  500' feet from PE / W Line of S  Sec. 3 Twp. 31 S. R. 14 PE W  Is Section: Regular or Irregular		
				ff Section Section	on is irregular, local comer used:	te well from near	rest corner boundar E SW
lease ro	Show locatio eds, tank bi	on of the well. S atteries, pipeline	Dive Cheen toes wite	PLAT rearest lease or unit I s, as required by the tach a separate plat in	Kansas Surface Owi	the predicted loca ner Notice Act (Ho	etions of Puse Bill 2032).
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						LEGEN	•
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4>					1115		ation tery Location
\$		*****	****** ********* ******		FAL -	Pipeline	Location
		į				Lease Ro	ine Location  pad Location
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## 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 well-CC WICHITA
- 5. The predicted locations of lease roads, tank batteries, pipelines, and electrical lines.

**RECEIVED** 

DEC 07 2010

# 15-125-32023-00-00 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.

Select the corresponding form being filed: C-1 (Intent) CB-1 (	Cathodic Protection Borehole Intent)	(Transfer) CP-1 (Plugging Application)		
OPERATOR: License # 33365	Well Location:			
Name: Layne Energy Operating, LLC	SW SE NE NE Sec. 3 Twp. 31 S. R. 14 Eas Wes			
Address 1: 1900 Shawnee Mission Parkway	County: Montgomery	μs. R <b>_</b> Las <b></b> west		
Address 2:	Lease Name. Zook	Well #: 1Q-3		
City: Mission Woods State: KS Zin: 66205 + 2001				
Contact Person: Victor H. Dyal	If filing a Form T-1 for multiple wells on a lease, enter the legal description on the lease below:			
Phone: (913 ) 748-3960 Fax: (913 ) 748-3950				
OPERATOR: License # 35305  Name: Layne Energy Operating, LLC  Address 1: 1900 Shawnee Mission Parkway  Address 2:				
	100			
Surface Owner Information:  Name: Bernice H. Zook				
Name:         Bernice H. Zook           Address 1:         1703 Bowline Rd.           Address 2:         City:         Houston         State:         TX         Zip:         77062         +	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			
Address 1:	owner information can be found in the county, and in the real estate property	ne records of the register of deeds for the		
Address 2: TX 77062	county, and in the real estate propert	y tax records of the county treasurer.		
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathor the KCC with a plat showing the predicted locations of lease roads, tank are preliminary non-binding estimates. The locations may be entered of Select one of the following:	batteries, pipelines, and electrical lir	nes. The locations shown on the plat		
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 to CP-1 that I am filing in connection with this form; 2) if the form to form; and 3) my operator name, address, phone number, fax, at	ocated: 1) a copy of the Form C-1, Focing filed is a Form C-1 or Form CB and email address.	orm CB-1, Form T-1, or Form -1, the plat(s) required by this		
I have not provided this information to the surface owner(s). I at KCC will be required to send this information to the surface ow task, I acknowledge that I am being charged a \$30.00 handling	mer(s). To mitigate the additional co-	st of the KCC performing this		
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 re 1 will be returned.	rceived with this form, the KSONA-1		
I hereby certify that the statements made herein are true and correct to	the best of my knowledge and belief.			
Date: 12/6/2010 Signature of Operator or Agent:	Hhyal Title:	Manager of Engineering		
	/ '	RECEIVED		

DEC 0 7 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: Layne Energy Operating, LLC		License Number: 33365			
Operator Address: 1900 Shawnee Mission Parkway			Mission Woods KS 6620	5	
Contact Person: Victor H. Dyal		Phone Number: 913-748-3960			
Lease Name & Well No.: Zook 1Q-3		) <del>-</del> 3	Pit Location (QQQQ):		
Type of Pit:	Pit is:		SW SE NE NE		
Emergency Pit Burn Pit	X Proposed Existing		Sec. 3 Twp. 31 R. 14 X East West		
Settling Pit X Drilling Pit	If Existing, date constructed:		1,115 Feet from North / South Line of Section		
Workover Pit Haul-Off Pit			500 Feet from X East / West Line of Section		
(If WP Supply API No. or Year Drilled)	Pit capacity:		Montgomery		
		(bbls)	County		
Is the pit located in a Sensitive Ground Water Area? Yes XNo		Chloride concentration: 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?		
X Yes No	Yes X No		Made of clay		
Pit dimensions (all but working pits):	) Length (fe	et)	Width (feet) N/A: Steel Pits		
Depth from	m ground level to dee	epest point:	3 (feet) No Pit		
If the pit is lined give a brief description of the liner  Describe procedures for periodic maintenance and determining					
material, thickness and installation procedure.		intermegrity, in	acluding any special monitoring.		
				$\bot$	
		Depth to shallow Source of inform	west fresh water feet. nation:	-	
✓Nonefeet Depth of water wellfeet		measured	well owner electric log KDWR	1	
Emergency, Settling and Burn Pits ONLY: Drilling, Works		over and Haul-Off Pits ONLY:			
Producing Formation: Type of mater		Type of materia	f material utilized in drilling/workover: fresh water mud		
Number of producing wells on lease: Numb		Number of work	ring pits to be utilized:		
Barrels of fluid produced daily: Abandonmen		Abandonment p	backfill and restore	ľ	
Does the slope from the tank battery allow all spilled fluids to			1		
flow into the pit? Yes No	, , , , , , , , , , , , , , , , , , ,		e closed within 365 days of spud date.  RECEIVED		
I hereby certify that the above stateme	ents are true and com	ect to the best of r	my knowledge and belief.  DEC 0 7 2010	1	
40/0/0040		1/11/11	Sheet was the same of the same		
12/6/2010 Date		//////////////////////////////////////	nature of Applicant or Agent KCC WICHITA	A	
,					
KCC OFFICE USE ONLY  Liner Steel Pit RFAC RFAS					
Date Received: 12 - 7-10 Permit Number	er:	Permit	Date: /2-8-10 Lease Inspection: Yes No		