Re-entry/washdown

| For KCC Use:    | 6-19-2011  |
|-----------------|------------|
| Effective Date: | 10 11 2011 |
| District #      | 7          |
| SGA?            | s XNo      |

### KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

March 2010
Form must be Typed
Form must be Signed
All blanks must be Filled

### NOTICE OF INTENT TO DRILL

| Synected Spurt Date: June 30, 2011   | Spot Description:  |  |
|--|--|--|
| Expected Spud Date: June 30, 2011  month day year  | N/2 N/2 NE Sec. 22 Twp. 12   | _S. R. <u>19</u>   |
| 32948  |  | N / S Line of Section  |
| DPERATOR: License#   |  | E / W Line of Section  |
| Name: _ Tomlinson Operating, LLC   |  | L / Line of occitors   |
| Address 1: 7154 W. State St. PMB 302   | Is SECTION: Regular Irregular?   |  |
| Address 2:   | (Note: Locate well on the Section Plat of  | n reverse side)  |
| City: Boise State: ID Zip: 83714 +   | County: Ellis  |  |
| Contact Person: Sid Tomlinson  | Lease Name: Honas Farms  | Well #: 1  |
| Phone: 208-229-1937  | Field Name: Wildcat  |  |
| CONTRACTOR: License#33350  | Is this a Prorated / Spaced Field?   | Yes XNo  |
| Name: Southwind Drilling, Inc.   | Target Formation(s): Topeka and Lansing  |  |
| value.   | Nearest Lease or unit boundary line (in footage): 3  | 2  |
| Well Drilled For: Well Class: Type Equipment:  |  |  |
| XOil   | Ground Surface Elevation: 2240   | feet MSL   |
| Gas Storage Pool Ext. Air Rotary   | vvater well within one-quarter mile:   | Yes No   |
| Disposal Wildcat Cable   | Public water supply well within one mile:  | ∐Yes XINo  |
| Seismic # of Holes Other   | Depth to bottom of fresh water: 180  |  |
| Other:   | Depth to bottom of usable water: 760 \$700   |  |
|  |  |  |
| If OWWO: old well information as follows:  | Surface Pipe by Alternate:I XIII   | (actual)   |
| Operator: Staab Oil Co.  | Length of Conductor Pipe (if any):   |  |
| Operator: Stable of St. St. Stable of St.  |  |  |
| TOTAL TELEVISION OF THE PROPERTY OF THE PROPER               | · <del></del>  |  |
| Original Completion Date: 02-15-08 Original Total Depth: 3915  |  |  |
| Brandan Brandan Danis and Brandan Bran               | Water Source for Drilling Operations:  No Well X Farm Pond Other:  |  |
|  | No Well Farm Pond Other:   |  |
| If Yes, true vertical depth:   | DWR Permit #:  |  |
| Bottom Hole Location:  | (Note: Apply for Permit with DV  |  |
| KCC DKT #:   | Will Cores be taken?   | ☐Yes XNo   |
|  | If Yes, proposed zone:   |  |
|  | ACCIDAVIT  | RECEIVED   |
|  | AFFIDAVIT  |  |
| The undersigned hereby affirms that the drilling, completion and even  | rentual plugging of this well will comply with K.S.A. 55 et. seq.  | JUN 13 2011  |
| It is agreed that the following minimum requirements will be met:  |  |  |
| it to agreed that the lementing the manner of the control of the c               |  | 3 2011   |
|  |  | -•   |
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For KCC Use ONLY
API # 15 - 051-25 727-0001

#### 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: Tomlinson Operating, LLC                                 | Location of Well: County: Ellis  |
|--|--|
| Lease: Honas Farms   |  |
| Well Number: 1   | 1,360 feet from X E / W Line of Section  |
| Field: Wildcat   | Sec. <u>22</u> Twp. <u>12</u> S. R. <u>19</u> E 🔀 W  |
| Number of Acres attributable to well:  QTR/QTR/QTR/QTR of acreage: | 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.

| <br>             |             |                                       |   | 1360        | FEL   |       | 1      |             |  |               |
|------------------|-------------|---------------------------------------|---|-------------|-------|-------|--------|-------------|--|---------------|
| -                | 332 F       | UZ.                                   |   |             |       |       |        |             | END  |               |
|                  |             |                                       |   |             |       |       |        | Tank Pipel  | Location Battery Le ine Locati ric Line Lo | on<br>ocation |
| <br>:            | :           | :                                     | , | :           | :     |       |        | Leas        | e Road Lo                                  | cation        |
| :<br>:<br>:<br>: |             | _ <b>N</b>                            | E |             |       |       | EXAM   | PLE         |  |               |
|                  |             | :<br>:                                |   |             |       | ••••• |        |             |  |               |
| <br>             | :<br>:<br>: | :<br>:                                |   | <u></u>     | <br>! |       |        | ٥-1         |  |               |
| <br>             | :<br>:<br>: | · · · · · · · · · · · · · · · · · · · |   | :<br>:<br>: | :     |       |        |             |  |               |
| •                | :           | :                                     |   |             |       |       | SEWARD | CO. 3390' F | <u>I∙</u><br>EL                            | RE            |

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

# RECEIVED JUN 1 3 2011

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

KCC WICHITA

1980' FSL

- 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.

### 15-051-25 727-00-01

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 # 32948   | Well Location:   |  |  |  |  |
|---|--|--|--|--|--|
| Name: Tomlinson Operating, LLC Address 1: 7154 W. State St. PMB 302 Address 2:  | N/2_NE_Sec. 22 Twp. 12 S. R. 19 Eas West   |  |  |  |  |
| Address 1: 7154 W. State St. PMB 302  | County: Ellis  |  |  |  |  |
| Address 2:  | Lease Name: Honas Farms Well #: 1  |  |  |  |  |
| City: Boise State: ID 7in: 83714  | If filing a Form T-1 for multiple wells on a lease, enter the legal description of   |  |  |  |  |
| Contact Person: Sid Tomlinson   | the lease below:   |  |  |  |  |
| Phone: ( 208 ) 229-1937 Fax: ( )  | _  |  |  |  |  |
| Contact Person: Sid Tomlinson  Phone: ( 208 ) 229-1937 Fax: ( )  Email Address: tomlinson.operating@gmail.com   | _  |  |  |  |  |
| Surface Owner Information:  |  |  |  |  |  |
| Name: Honas Farms, LLC Address 1: 1801 Spruce   | 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  |  |  |  |  |
| Address 2:  | county, and in the real estate property tax records of the county treasurer.   |  |  |  |  |
| City: Ellis State: KS Zip: 67637 +  | _  |  |  |  |  |
| are preliminary non-binding estimates. The locations may be entere  | d on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.   |  |  |  |  |
| are preliminary non-binding estimates. The locations may be entere<br>Select one of the following:  | d 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 owner(s) of the land upon which the subject well is or will the subject well in the subject well is or will the subject well in the subject well in the subject well in the subject well is or will the subject well in the | te Act (House Bill 2032), I have provided the following to the surface be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form rm being filed is a Form C-1 or Form CB-1, the plat(s) required by this   |  |  |  |  |
| Select one of the following:  I certify that, pursuant to the Kansas Surface Owner Notic owner(s) of the land upon which the subject well is or will to CP-1 that I am filing in connection with this form; 2) if the form; and 3) my operator name, address, phone number, fa  I have not provided this information to the surface owner(s).  KCC will be required to send this information to the surface.  | te Act (House Bill 2032), I have provided the following to the surface be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form rm being filed is a Form C-1 or Form CB-1, the plat(s) required by this   |  |  |  |  |
| 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 to CP-1 that I am filing in connection with this form; 2) if the form; and 3) my operator name, address, phone number, father I have not provided this information to the surface owner(s). KCC will be required to send this information to the surface task, I acknowledge that I am being charged a \$30.00 hand.  | the Act (House Bill 2032), I have provided the following to the surface the located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form rm being filed is a Form C-1 or Form CB-1, the plat(s) required by this x, and email address.  I acknowledge that, because I have not provided this information, the electron of the KCC performing this ling fee, payable to the KCC, which is enclosed with this form.  |  |  |  |  |
| 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; and 3) my operator name, address, phone number, father I have not provided this information to the surface owner(s). KCC will be required to send this information to the surface task, I acknowledge that I am being charged a \$30.00 hand form and the associated Form C-1, Form CB-1, Form T-1, or Form I hereby certify that the statements made herein are true and correct  | the Act (House Bill 2032), I have provided the following to the surface the located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form rm being filed is a Form C-1 or Form CB-1, the plat(s) required by this x, and email address.  I acknowledge that, because I have not provided this information, the electron of the ACC performing this ling fee, payable to the ACC, which is enclosed with this form.  It the fee is not received with this form, the KSONA-1 CP-1 will be returned. |  |  |  |  |
| 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; and 3) my operator name, address, phone number, father I have not provided this information to the surface owner(s). KCC will be required to send this information to the surface task, I acknowledge that I am being charged a \$30.00 hand form and the associated Form C-1, Form CB-1, Form T-1, or Form I hereby certify that the statements made herein are true and correct  | the Act (House Bill 2032), I have provided the following to the surface the located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form rm being filed is a Form C-1 or Form CB-1, the plat(s) required by this x, and email address.  I acknowledge that, because I have not provided this information, the electron of the ACC performing this ling fee, payable to the ACC, which is enclosed with this form.  It the fee is not received with this form, the KSONA-1 CP-1 will be returned. |  |  |  |  |
| 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; and 3) my operator name, address, phone number, father I have not provided this information to the surface owner(s). KCC will be required to send this information to the surface task, I acknowledge that I am being charged a \$30.00 hand form and the associated Form C-1, Form CB-1, Form T-1, or Form to the surface owner (s).  | the Act (House Bill 2032), I have provided the following to the surface the located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form rm being filed is a Form C-1 or Form CB-1, the plat(s) required by this x, and email address.  I acknowledge that, because I have not provided this information, the electron of the ACC performing this ling fee, payable to the ACC, which is enclosed with this form.  It the fee is not received with this form, the KSONA-1 CP-1 will be returned. |  |  |  |  |

## 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: Tomlinson Operating  | License Number: 32948                            |  |   |  |  |  |  |  |
|---|--|--|---|--|--|--|--|--|
| Operator Address: 7154 W. State S   | Boise ID 8371                                    |  |   |  |  |  |  |  |
| Contact Person: Sid Tomlinson   |  | Phone Number: 208-229-1937                   |   |  |  |  |  |  |
| Lease Name & Well No.: Honas Farm   | s 1  | Pit Location (QQQQ):                         |   |  |  |  |  |  |
| Type of Pit:  Emergency Pit  Burn Pit  Settling Pit  X Drilling Pit   | Pit is:    X   Proposed   If Existing, date core | Existing                                     | N/2   |  |  |  |  |  |
| Workover Pit Haul-Off Pit  (If WP Supply API No. or Year Drilled)   | Pit capacity:                                    | (bbls)                                       | 1,360 Feet from X East / West Line of Section Ellis Count   |  |  |  |  |  |
| is the pit located in a Sensitive Ground Water A  | Area? Yes 🔀                                      | No   | Chloride concentration: mg/l<br>(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? Bentonite and natural clays from drilling fluids.  |  |  |  |  |  |
| Pit dimensions (all but working pits):  | Length (fee                                      |  | Width (feet)N/A: Steel Pits  4(feet)No Pit  |  |  |  |  |  |
| If the pit is lined give a brief description of the I material, thickness and installation procedure.   |  | liner integrity, in                          | edures for periodic maintenance and determining ncluding any special monitoring.  nitoring while conducting drilling operations.  |  |  |  |  |  |
| Distance to nearest water well within one-mile  | of pit:  | Depth to shallo                              | owest fresh water/80 feet.  |  |  |  |  |  |
|   | 280 feet   | measured                                     |   |  |  |  |  |  |
| 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 se |  | Type of materia                              | over and Haul-Off Pits ONLY:  al utilized in drilling/workover:  chemical mud  chemical mud  2  rking pits to be utilized:  procedure:  Allow pit to dry by evaporation, then backfill and restore surface to natural contours. |  |  |  |  |  |
| flow into the pit? Yes No   |  | Drill pits must l                            | be closed within 365 days of spud date. RECEIVE   |  |  |  |  |  |
| I hereby certify that the above stater  | nents are true and cor                           | f my knowledge and belief. JUN 1 3 2         |   |  |  |  |  |  |
| 6-8-2011<br>Date  |  | Sid &  | Justine of Applicant or Agent   |  |  |  |  |  |
|   | ксс  | OFFICE USE O                                 | Liner Steel Pit RFAC RFAS   |  |  |  |  |  |
| Date Received: 4-13-14 Permit Num   | nber:  | nit Date: 6-13-11 Lease Inspection: Yes 🛭 No |   |  |  |  |  |  |

Notice: Fill out COMPLETELY and return to Conservation Division at the address below within 60 days from plugging date.

### KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

### WELL PLUGGING RECORD K.A.R. 82-3-117

FEB 2 1 2008

CONSERVATION Form must be Signed
All blanks must be Filled

| Lease Operator: STA  | AAB OIL CO.                             |                      |               |                    | LABI         | Name                 | 051-25 727-4                 | ~ M                        |
|--|---|----------------------|---------------|--------------------|--------------|----------------------|------------------------------|----------------------------|
| Address: 1607 Hor  |   |                      |               | 7601               |              | se Name: Hona        | 051-25,727~(                 | 20~W                       |
| Phone: (785) 625- 5  | 013 Operato                             | r License #:         | 6037          | _                  |              |                      | 2                            | <del></del>                |
| Type of Well: D &  | <u>A</u>                                |                      |               |                    |              |                      | - <u>NE</u> - <u>NW</u>      |                            |
| (Oil, Gas D&A, SWD, ENHR, )  | veler Supply Wall, Cathoo               | lic, Other)          | (If SVV       | D or ENHR)         |              |                      | North / South Sec            |                            |
| The plugging proposal was  |   | 15-2008              |               | (Dete)             | 1,3          | 360 Feet from R      | Bast / West Sec              | ition Line                 |
| by: Pat Bedore   |   | <del></del> .        | (KCC District | Agent's Name)      | 800          | 22 - 12              | JESSI / West Sec             | don Line                   |
| Is ACO-1 filed? Yes  | No If not, is w                         | ell log attached     | 7 X Yes       | ∏No                | Court        | nty: Ellis           | _8. R_19Ess                  | t 🔀 West                   |
| Producing Formation(s): List   | All (if needed attach and               | other sheet)         |               |                    | ŀ            |                      |                              |                            |
|  | Depth to Top:                           |                      |               |                    |              |                      | 2-15-08                      |                            |
|  | Depth to Top:                           |                      |               |                    | 1            | •                    | 2-15-08                      |                            |
|  | Depth to Top:                           |                      | 1             | .D                 | Plugi        | ging Completed:      | 2-15-08                      |                            |
| Show depth and thickness of  |   | formations.          |               |                    |              |                      |                              |                            |
| Oll, Gas or Wa   |   |                      |               | asing Record (8    | Surface (    | Conductor & Producti | ioni                         |                            |
| romandi  | Content                                 | From                 | To            | Size               |              | Put In               | Pulled Out                   |                            |
|  |   |                      |               | 8 5/8"             | •            | 218'                 | Cmtd. w/165                  | Sav                        |
|  |   |                      |               |                    |              |                      | .,,200                       | -542                       |
|  |   |                      |               |                    |              |                      |                              |                            |
|  |   |                      |               | <u> </u>           | <del>`</del> |                      |                              |                            |
| Describe in detail the manner hole. If cement or other plus Run drill pipe to pump 25 sax ceme drill pipe: run | o 3,830', pur<br>ent thru dril          | mp 25 sax<br>pipe; r | cement        | thru dri           | <u>ill r</u> | pipe; run d          | rill pipe to 1               | ,580',                     |
|  | CTTTT DIDE CO                           | 2/U', p              | ump 40        | sax cemer          | nt +1        |                      |                              |                            |
| 10 sax cement do   | our cement of                           | t bring to           | cerrar        | . Circul           | late         | 15 sax ceme          | ent down rat w               | ole and                    |
| rrame or Plugging Contractor   | r SHIELD                                | S DRILL              | ING CO        | •                  | [            | License #: 518       | 84                           |                            |
| Address: PO BOX  | 709, Russe.                             | <u>11, KS</u>        | 67665         |                    |              |                      |                              |                            |
| Name of Party Responsible t  | or Plugging Fees: S'                    | TAAB OI              | L CO          |                    |              |                      |                              | <del></del>                |
| State of KANSAS  | County,                                 | RUSSEL               | <u> </u>      | . , 68,            |              |                      |                              |                            |
|  | Burton Beer                             |                      |               | )<br>Employee of 3 | Cont         | ractor               | above-described well, bein   |                            |
| swom on ceth, says: That I h<br>same are true and correct, so  | lave knowledge of the f<br>help me God. | acts statements      | , and matter  | herein containe    | ed, and      | the log of the abov  | ve-described well is as file | ) first duly<br>d, and the |
|  | (8                                      | Signature)           | Bu            | ton                | <u> </u>     | ) eery               |                              |                            |
|  | (/                                      | Address) PC          | Box 7         | 09, Rus            | sel          | 1, KS V67            | 665                          |                            |
|  | SUBSCRIBED and SY                       | VORN TO befor        | re me this/   | gctic<br>day of _  | te.          | bruary               | . 20                         | 08                         |
|  | - Just                                  | Notary Public        | pea           | Му (               | Commis       | sion Expires:        | RUTH PHILI<br>Sinte of Kar   | IPS.                       |
| •  | Mail to: KCC - Cons                     | ervation Divis       | ion, 130 S. I | Aarket - Room      | n 2078,      | Wichita, Kansas      | My Appt. Exp. 5-26           | -20/1                      |

Of State of