# For KCC Use: //-2/-2011 Effective Date: 4 District # 4

### 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 Form KSONA-1, Certification of Compliance with the	KCC five (5) days prior to commencing well se Kansas Surface Owner Notification Act, MUST be submitted with this form.	
Form KSONA-1, Certification of Compliance with the Expected Spud Date:  11/21/2011  month day year  34405  OPERATOR: License#  Name:E&B NATURAL RESOURCES MANAGEMENT CORPORATION Address 1:1600 NORRIS RD Address 2:	Spot Description:  Spot Descript	MSL No
Directional, Deviated or Horizontal wellbore?  Yes, true vertical depth:	No Well Farm Pond Other: HAULED  DWR Permit #:	
Bottom Hole Location:	(Note: Apply for Permit with DWR	
KCC DKT #:	Will Cores be taken? Yes If Yes, proposed zone:	Ŋo
00121 10	REC	ElVE
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t is agreed that the following minimum requirements will be met:	NOV	1.5 20
<ol> <li>Notify the appropriate district office <i>prior</i> to spudding of well</li> <li>A copy of the approved notice of intent to drill <i>shall be</i> poste</li> <li>The minimum amount of surface pipe as specified below <i>sha</i> through all unconsolidated materials plus a minimum of 20 fe</li> <li>If the well is dry hole, an agreement between the operator ar</li> <li>The appropriate district office will be notified before well is ei</li> <li>If an ALTERNATE II COMPLETION, production pipe shall be Or pursuant to Appendix "B" - Eastern Kansas surface casin</li> </ol>	ed on each drilling rig;  all be set by circulating cement to the top; in all cases surface pipe shall be set eet into the underlying formation.  Indicate the district office on plug length and placement is necessary prior to plugging;	/ICHI
hereby certify that the statements made herein are true and to the	e best of my knowledge and belief.	
Date: 11/15/2011 Signature of Operator or Agent:	Title: AGENT	
For KCC Line ONLY	Remember to:	
For KCC Use ONLY  API # 15 - 051-24230-00-00  Conductor pipe required None feet  Minimum surface pipe required 200 feet per ALT.  Approved by: **Pure **IF-16-201**  This authorization expires: 11-16-2012  (This authorization void if drilling not started within 12 months of approval of the started started within 12 months of approval of the started started within 12 months of approval of the started started within 12 months of approval of the started started within 12 months of approval of the started started within 12 months of approval of the started started started within 12 months of approval of the started star	Notify appropriate district office 48 hours prior to workover or re-entry; Submit plugging report (CP-4) after plugging is completed (within 60 days);	31 11 17
Spud date: Agent:	Well will not be drilled or Permit Expired Date:	$\overline{\mathbb{X}}$
Mail to: KCC - Conservation Division,	Signature of Operator or Agent:	Į <u>X</u> I

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202 For KCC Use ONLY
API # 15 - 051-26230-0000

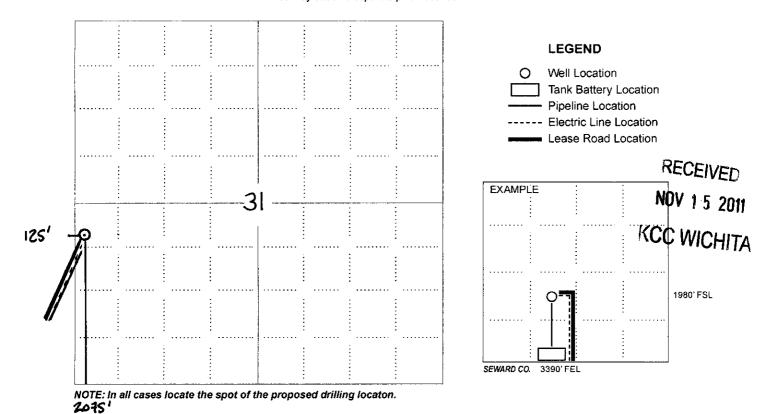
#### IN ALL CASES PLOT THE INTENDED WELL ON THE PLAT BELOW

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

Operator: E&B NATURAL RESOURCES MANAGEMENT CORPORATION	Location of Well: County: ELLIS
Lease: MARSHALL A	2,075 feet from N / N S Line of Section
Well Number: 36	125 feet from E / X W Line of Section
Field: BEMIS-SHUTTS	Sec. 31 Twp. 11 S. R. 17 E W
Number of Acres attributable to well:	Is Section: Regular or Irregular
QTR/QTR/QTR of acreage:	
	If Section is Irregular, locate well from nearest corner boundary.  Section corner used: NE NW SE SW
PLA	т

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.



#### 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; CG-8 for gas wells).
- 5. The predicted locations of lease roads, tank batteries, pipelines, and electrical lines.

# 15-051-26230-05-05 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

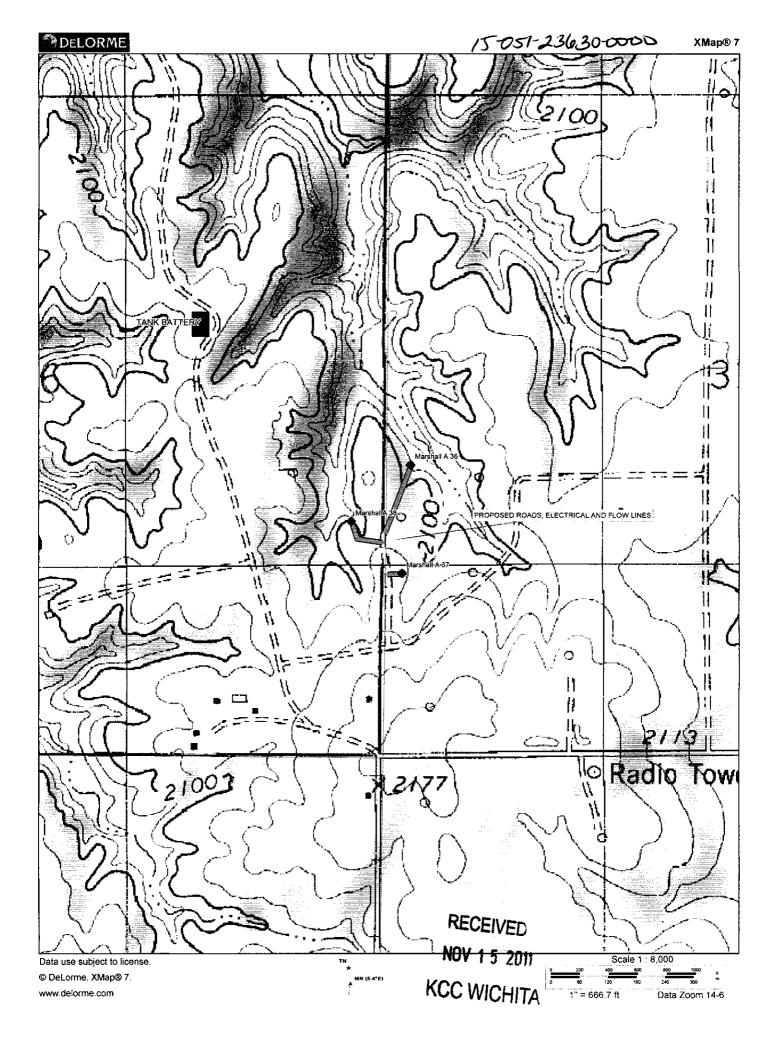
# CERTIFICATION OF COMPLIANCE WITH THE KANSAS SURFACE OWNER NOTIFICATION ACT

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 # 34405	Well Location:
Name: E&B NATURAL RESOURCES MANAGEMENT CORPORATION	Nu Nu Nu Sec. 31 Twp. 11 S. R. 17 Eas West
OPERATOR: License # 34405  Name: E&B NATURAL RESOURCES MANAGEMENT CORPORATION  Address 1: 1600 NORRIS RD	County: ELLIS
Address 2:	Lease Name: MARSHALL A Well #: 36
City: BAKERSFIELD State: CA Zip: 93308 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of
Contact Person: Kenton Hupp	the lease below:
Phone: (316) 265 5300 Fax: (316) 265 61 69	
Email Address: Kenton 2 @ KLHOZ AWDGAS CONSULTING COM	
Surface Owner Information:	
Name: RON PEAVEY	When filing a Form T-1 involving multiple surface owners, attach an additional
Address 1: 207 SW 9TH ST	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: PLAINVILLE State: KS Zip: 67663 +	
are preliminary non-binding estimates. The locations may be entered on Select one of the following:	batteries, pipelines, and electrical lines. The locations shown on the plat the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.
I certify that, pursuant to the Kansas Surface Owner Notice Acowner(s) of the land upon which the subject well is or will be lo	cated: 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 b form; and 3) my operator name, address, phone number, fax, ar	ellig filed is a rotti C-1 of rotti C6-1, the plat(s) required by this id email address.
form; and 3) my operator name, address, phone number, fax, ar	cknowledge that, because I have not provided this information, the ner(s). To mitigate the additional cost of the KCC performing this
form; and 3) my operator name, address, phone number, fax, and I have not provided this information to the surface owner(s). I acknowledge that I am being charged a \$30.00 handling to the surface owner(s).	the demail address.  Sknowledge that, because I have not provided this information, the ner(s). To mitigate the additional cost of the KCC performing this fee, payable to the KCC, which is enclosed with this form.  See with this form. If the fee is not received with this form, the KSONA-1
form; and 3) my operator name, address, phone number, fax, and I have not provided this information to the surface owner(s). I ac KCC will be required to send this information to the surface own task, I acknowledge that I am being charged a \$30.00 handling of the second option, submit payment of the \$30.00 handling in the second option.	the email address.  Sknowledge that, because I have not provided this information, the ener(s). To mitigate the additional cost of the KCC performing this fee, payable to the KCC, which is enclosed with this form.  The ewith this form. If the fee is not received with this form, the KSONA-1 will be returned.
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NOV 1 5 2011



### 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: E&B NATURAL RESOURCES MANAGEMENT CORPORATION			License Number: 34405	
Operator Address: 1600 NORRIS RD			BAKERSFIELD CA 93308	
Contact Person: KENTON HUPP			Phone Number: 316-265-5800	
Lease Name & Well No.: MARSHALL A 36		Pit Location (QQQQ):		
Type of Pit:	Pit is:		SW. NW . NW . SW	
Emergency Pit Burn Pit	X Proposed Existing		Sec. 31 Twp. 11 R. 17 East X West	
Settling Pit X Drilling Pit	If Existing, date constructed:		2,075 Feet from North / X South Line of Section	
Workover Pit Haul-Off Pit (If WP Supply API No. or Year Drilled)	Pit capacity: 7,100	(bbls)	Feet from East / X West Line of Section County	
is the pit located in a Sensitive Ground Water A			Chloride concentration: mg/l  (For Emergency Pits and Settling Pits only)	
Is the bottom below ground level?  X Yes No	Artificial Liner?	No	How is the pit lined if a plastic liner is not used? BENTONITE	
Pit dimensions (all but working pits):	00 Length (fe	et) 100	Width (feet) N/A: Steel Pits	
Depth fro	m ground level to dea	epest point:	(feet) No Pit	
Distance to nearest water well within one-mile of	f pit:	Depth to shallov Source of inforn	vest fresh water 33 feet.	
>3000 feet Depth of water well	45 feet	measured	well owner electric log X KDWR	
Emergency, Settling and Burn Pits ONLY: Dr		Drilling, Worko	ver and Haul-Off Pits ONLY:	
Producing Formation:		Type of material	utilized in drilling/workover:BENTONITE MUD	
Number of producing wells on lease:		Number of work	ng pits to be utilized: 2	
Barrels of fluid produced daily:  Does the slope from the tank battery allow all spilled fluids to flow into the pit?  Yes No		Abandonment procedure: ALLOW FOR EVAPORATION. FILL IN AND COVER PITS.		
		Drill pits must be	closed within 365 days of spud date. RECEIVE	
I hereby certify that the above statement	ents are true and corre	ect to the best of m		
11/15/2011 Date		Sigr	KCC WICH	
KCC OFFICE USE ONLY				
Date Received: //-/5-// Permit Numb	er:	Permit	Liner Steel Pit RFAC RFAS  Date: //-/5-// Lease Inspection: Yes K No	