For KCC Use: Effective Date:

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

| | SONA-1, Certificatio | n of Compli 20 | ance with the Kansa 2011 | | | ion Act, l | MUST be | submitte | d with th | is form. | | |
|---|---------------------------------------|---|---------------------------------------|-----------------------------------|----------------------------------|------------|-------------|---------------------|-------------|-------------|--------------------|--------------|
| Expected Spud Date: | month | day | year | Spot [| Description: | | | | | | | |
| | _ | - "", | ,,,,, | (Q/Q/Q/Q | _ <u>ne</u> _ <u>sw</u> | | | - | | | | a . |
| OPERATOR: License# _ | 34559 | | *** * * * *** * * * * * * * * * * * * | | 1,650 | | | | | | Line of Sec | |
| Name: WM KS Energy | | | | _ | 1,650 | | | | ΧE | / 🔲 w : | Line of Sec | tion |
| Address 1: P.O. Box H | | | | Is SEC | CTION: 🔀 R | Regular [| irregu | ılar? | | | | |
| Address 2: | | | | | (Note | e: Locate | well on the | e Section F | Plat on rev | verse side) | | |
| | | <u>S. </u> | <u>7663</u> + | — Count | y: Ellis | | | | rut on ro | ,0,00 0,00) | | |
| Contact Person: Bill Rol | binson | | | lesse | Name: Wasii | nger C | | | | _ Well #: | 6 | |
| Phone: 785-688-4040 | | | | — Eield N | Name: Bemis | s-Shutts | | | | ****. | | |
| CONTRACTOR: License | # 33493 | | | | a Prorated / S | | | | | Г | Yes 🔀 | Ala |
| Name: American Eagle | | | | | Formation(s): | • | | | | _ | | .10 |
| | 14/ " 01 | _ | | | st Lease or ur | | | n footage) | . 990 / | / | | |
| Well Drilled For: | Well Class: | <u> </u> | e Equipment: | | d Surface Ele | | | ™ | • | | feet IV | 121 |
| <u></u> ∐Oil ∐Enh | Rec XInfield | <u> </u> | Mud Rotary | | well within on | | | | | Г | Yes 🔀 | |
| Gas Stor | · = | | Air Rotary | | water supply | • | | lo, | | - | Yes X | 1 |
| | osal Wildca | t <u> </u> | Cable | | to bottom of fi | | | | | L | Ties [V | INU |
| Seismic ;# | of HolesOther | | | • | to bottom of t | | | | 720 | , | | |
| Other: | | | | | to bottom of υ e Pipe by Alte | _ | ater: 💢 | | , | | | |
| If OWWO: old we | ell information as follo | ws: | | | | _ | | | | REC | EIVED | |
| t-mad | | | | - | n of Surface P n of Conductor | • | | | | | | _ |
| Operator: | | | | | ted Total Dept | | | ~ | | DFC | 0 6 201 | |
| Well Name: | | Outside at Take | I Danish. | | tion at Total D | | | _ | • | · | | |
| Original Completion D | Date: | Original tota | i Deptn: | | | | | | / K | CC V | VICHIT | Δ |
| Directional, Deviated or H | forizontal wellbore? | | ☐ Yes X No | _ | Source for Dr | | | • | | | ,,0,,,, | , |
| If Yes, true vertical depth: | | | | L | WellFar | | | r: uuok | | | | |
| Bottom Hole Location: | | | | | Permit #: | | Apply for | Permit with | OWE | - | | |
| KCC DKT #: | | | | \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ | ores be taken? | | Apply 101 | r Cilling Will | , D.,,, [| | Yes 🔀 | Nin |
| | | | | | proposed zon | | | | | | _ ico (A) | 140 |
| | | | | 11 103, | proposed zon | | | | | | | |
| | | | Al | AFFIDAVIT | | | | | | | | |
| The undersigned hereby | • | | , | plugging of thi | is well will co | mply with | h K.S.A. | 55 et. sec | 1. | | | |
| It is agreed that the follo | wing minimum requ | iirements w | ill be met: | | | | | | | | | |
| Notify the appropri | | | | | | | | | | | | |
| 2. A copy of the app | | | • | | | | | | | | | |
| 3. The minimum ame | | • | | • | • | the top; | in all cas | ses surfac | æ pipe s | hall be s | et | |
| 4. If the well is dry h | | • | num of 20 feet into t | | • | and nla | cement i | e nacaees | ory prior | r to plua | nina: | |
| 5. The appropriate d | | | | | | | | 3 11666338 | ary prior | to pluge | ying, | |
| 6. If an ALTERNATE | | | | | | | | within 12 | 0 DAYS | of spud | date. | |
| | | | urface casing order | | | | | | | | | |
| must be complete | ed within 30 days of | the spud da | ate or the well shall I | l be plugged. I | n all cases, | NOTIFY | district | office pri | or to any | y cementi | ng. | |
| I hereby certify that the | statements made h | erein are tru | ie and to the best of | of my knowled | ge and belief. | • | | | | | | |
| 10 10 11 | | | پ کر | \leftarrow | | | | _{itle:} ag | ent | | | |
| Date: 10-10-11 | Signature of | Operator of | r Agent: | <u></u> | | ··· | Т | itle: <u> </u> | CIT | | | |
| For KCC Use Child | | | | Rememb | er to: | | | | | | | |
| API # 15 - OSI- | -21.245- | 00-0i |) | l l | rtification of C | • | | e Kansas | Surface (| Owner No | tification | 07 |
| API # 15 - US 1 | | | | - ' | ONA-1) with I | | | | | | | ٦ |
| Conductor pipe required | | e f | eet | l l | I Pit Application | , | - | | | | | |
| Minimum surface pipe re | equired20 | $\mathcal{U}_{	ext{fee}}$ | t per ALT. 🔲 I 🕌 🛚 | i I | mpletion Form | | | • | • | | | = |
| Approved by: Put 1 | | | | - THE GG | eage attribution peropriate dis | | _ | | | | rv: | |
| Ī | 12-7-0 | 012 | | - | plugging repo | | | - | | | - | - |
| This authorization expire | · · · · · · · · · · · · · · · · · · · | | of approval data | l l | written approv | | | | - | • | Juj 0), | 0 |
| (This authorization void if | ummy not started With | mi +∠ months | ь от арргочат дате.) | | ill not be drille | | • | | - | | tion date) | |
| Soud date: | Agost | | | | check the box | | | | | | | |
| Spud date: | Agent: | | | | II will not be | drilled o | r Permit | Expired | Date: | | | X |
| | | | | | nature of Ope | | | | | | | Ķ |
| Mail to | KCC - Conserva | tion Divisi | on, | 5,9 | | | S | | | | | > |

For KCC Use ONLY API#15-051-26245-0000

Operator: WM KS Energy Resources, LLC

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.

Location of Well: County: Ellis

| Lease: Wasinger C | 1,650feet from X N / S Line of Section |
|---|--|
| Well Number: 6 | 1,650 feet from 🔀 E / 🔲 W Line of Section |
| Field: Bemis-Shutts | Sec. <u>28</u> Twp. <u>11</u> S. R. <u>18</u> E $\overline{\times}$ W |
| Number of Acres attributable to well: QTR/QTR/QTR/QTR of acreage: _c ne sw ne | Is Section: Regular or Irregular |
| | If Section is Irregular, locate well from nearest corner boundary. Section corner used: NE NW SE SW |
| PLA Show location of the well. Show footage to the nearest lea | |
| lease roads, tank batteries, pipelines and electrical lines, as requi You may attach a sep | ase or unit boundary line. Show the predicted locations of ired by the Kansas Surface Owner Notice Act (House Bill 2032). RECEIVED harate plat if desired. |
| Mar. | DEC 0 6 2011 |
| | LEOSNID |
| | C Well Location KCC WICHITA |
| 1650 | Tank Battery Location |
| | Pipeline Location |
| 8 | Electric Line Location 6 \$ 0 |
| | 230; |
| | EXAMPLE : |
| 28 | EXAMPLE |
| | |
| | |
| | |
| | 1980' FSL |
| | |
| | |

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

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

- 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.

15-051-26245-0000

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) T-1 (Transfer) CP-1 (Plugging Application) | | | | |
|---|---|--|--|--|--|
| OPERATOR: License # 34559 | | | | | |
| Name: WM KS Energy Resources,LLC Address 1: P.O. Box H | Well Location: <u>c_ne_sw_ne_Sec28_Twp11_SR18EastX</u> West | | | | |
| Address 1. P.O. Box H | County Ellis | | | | |
| Address 2: | County: Ellis Lease Name: Wasinger C Well #: 6 | | | | |
| City: Plainville State: KS. Zip: 67663 | If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below: | | | | |
| Contact Person: Bill Robinson Phone: (785) 688-4040 Fax: () | RECEIVED | | | | |
| Email Address: | DEC 0 6 20 | | | | |
| Surface Owner Information: | KCC WICHIT | | | | |
| Name: Leo Dorzweiler | When filing a Form T-1 involving multiple surface owners, attach an additiona sheet listing all of the information to the left for each surface owner. Surface | | | | |
| Name: Leo Dorzweiler Address 1: 2260 Catherine Rd | | | | | |
| Address 2: | county, and in the real estate property tax records of the county treasurer. | | | | |
| City: Hays State: KS. Zip: 67601 + | | | | | |
| the KCC with a plat showing the predicted locations of lease roads, tank are preliminary non-binding estimates. The locations may be entered or Select one of the following: I certify that, pursuant to the Kansas Surface Owner Notice A | dic Protection Borehole Intent), you must supply the surface owners and a batteries, pipelines, and electrical lines. The locations shown on the plat in the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. cct (House Bill 2032), I have provided the following to the surface sected: 1) a copy of the Form C-1. Form CB-1. | | | | |
| 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, and | ecated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form ceing filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address. | | | | |
| I have not provided this information to the surface owner(s). I ac KCC will be required to send this information to the surface ow task, I acknowledge that I am being charged a \$30.00 handling | cknowledge 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. | | | | |
| 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-1 | fee with this form. If the fee is not received with this form, the KSONA-1 will be returned. | | | | |
| I hereby certify that the statements made herein are true and correct to | the best of my knowledge and belief. | | | | |
| Date: 10-10-11 Signature of Operator or Agent: | Title: agent | | | | |

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: WM KS Energy Re | sources,LLC | License Number: 34559 | | | | | |
|--|-----------------------|--|---|--|--|--|--|
| Operator Address: P.O. Box H | | Plainville KS. 67663 | | | | | |
| Contact Person: Bill Robinson | | Phone Number: 785-688-4040 | | | | | |
| Lease Name & Well No.: Wasinger (| C 6 | Pit Location (QQQQ): | | | | | |
| Type of Pit: | Pit is: | _c _ ne _ sw _ ne | | | | | |
| Emergency Pit Burn Pit | X Proposed | Existing | Sec. 28 Twp. 11 R. 18 | | | | |
| Settling Pit X Drilling Pit | If Existing, date co | nstructed: | 1,650 Feet from X North / South Line of Section | | | | |
| Workover Pit Haul-Off Pit (If WP Supply API No. or Year Drilled) | Pit capacity: | | 1,650 Feet from X East / West Line of Section | | | | |
| | | (bbls) | Ellis County | | | | |
| Is the pit located in a Sensitive Ground Water A | urea? Yes | √ No | 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? | | | | |
| Yes No | Yes X | | Bentonite & Drilling Mud | | | | |
| Pit dimensions (all but working pits): | Lerigin (lee | • | Width (feet) N/A: Ste RESEIVED | | | | |
| , <u> </u> | m ground level to des | <u> </u> | No Pit DEC 0 6-20 | | | | |
| If the pit is lined give a brief description of the line material, thickness and installation procedure. | ner | liner integrity, in | dures for periodic maintenance and determining and special monitoring. KCC WICHI | | | | |
| | | | | | | | |
| Distance to nearest water well within one-mile of | of pit: | | west fresh water 180 74 feet. | | | | |
| feet Depth of water well | 9afeet | Source of inform | mation: well owner electric log KDWR | | | | |
| Emergency, Settling and Burn Pits ONLY: Drilling, Workover and Haul-Off Pits ONLY: | | | | | | | |
| Producing Formation: | | Type of material utilized in drilling/workover: chemical mud | | | | | |
| Number of producing wells on lease: | | Number of working pits to be utilized:3 | | | | | |
| Barrels of fluid produced daily: | | Abandonment procedure: backfilled after evaporation | | | | | |
| Does the slope from the tank battery allow all sp flow into the pit? Yes No | oilled fluids to | Drill pits must be 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. | | | | | | | |
| 10-10-11 | | RO | | | | | |
| Date | | Signature of Applicant or Agent | | | | | |
| KCC OFFICE USE ONLY Liner Steel Pit RFAC RFAS | | | | | | | |
| Date Received: 12-7-11 Permit Numb | er: | Permit | Date: 12-7-11 Lease Inspection: Yes No | | | | |