## For KCC Use: Effective Date: District # SGA? Yes 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

Form KSONA-1, Certification of Compliance with the Kansas Surface Owner Notification Act, MUST be submitted with this form.

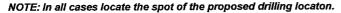
Expected Spud Date: May 15, 2012	Spot Description:	
month day year	<u>nw _ nw _ nw Sec. 7 Twp. 9 S. R</u>	21 EXW
34559	(0/0/0/0) 330 feet from X N /	S Line of Section
OPERATOR: License#	330 feet from E /	
	Is SECTION: Regular Irregular?	<u> </u>
Address 1: P.O. Box H	18 SECTION. Milegular:	
Address 2:	(Note: Locate well on the Section Plat on revers	e side)
City: Plainville State: KS Zip: 67663 +	County: Graham	
Contact Person: Bill Robinson	Lease Name: Shaw	<b>Veil</b> #:
Phone: 785-688-4040	Field Name: Morel	
CONTRACTOR: License#34535	Is this a Prorated / Spaced Field?	Yes No
Name:Integrity Drilling, LLC	Target Formation(s): Arbuckle	
	Nearest Lease or unit boundary line (in footage): 330	
Well Drilled For: Well Class: Type Equipment:	Ground Surface Elevation: 2254	feet MSL
XOil		Yes No
Gas Storage Pool Ext. Air Rotary	Water well within one-quarter mile:	
Disposal Wildcat Cable	Public water supply well within one mile:	Yes No
Seismic ; # of Holes Other	Depth to bottom of fresh water: 150	
Other:	Depth to bottom of usable water: 1966 950	
	Surface Pipe by Alternate:	
lf OWWO: old well information as follows:	Length of Surface Pipe Planned to be set:	
Operator:	Length of Conductor Pipe (if any): none	
Well Name:	Projected Total Depth: 3900	
Original Completion Date: Original Total Depth:	Formation at Total Depth: Arbuckle	
Original Completion Date.	Water Source for Drilling Operations:	
Directional, Deviated or Horizontal wellbore?	Well Farm Pond Other: truck	
If Yes, true vertical depth:	DWR Permit #:	
Bottom Hole Location:	(Note: Apply for Permit with DWR	
KCC DKT #:	Will Cores be taken?	Yes X No
	If Yes, proposed zone:	
	ii ios, proposed zone.	5-5
AFF	IDAVIT	RECEIVED
The undersigned hereby affirms that the drilling, completion and eventual plug	ging of this well will comply with K.S.A. 55 et. seq.	
It is agreed that the following minimum requirements will be met:		APR 3 0 2012
<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> posted on each</li> </ol>	drilling rig.	
<ol> <li>A copy of the approved notice of intent to drill shall be posted on each</li> <li>The minimum amount of surface pipe as specified below shall be set to through all unconsolidated materials plus a minimum of 20 feet into the</li> </ol>	y circulating cement to the top; in all cases surface pipe <b>sha</b>	₯₯₯₼₼₼₼
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 distr	ict office on plug length and placement is necessary prior to	
5. The appropriate district office will be notified before well is either plugge	ed 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 DAVS of	
	Month below any usable water to surface within 120 DA10 of	spud date.
Or pursuant to Appendix "B" - Eastern Kansas surface casing order #13	33,891-C, which applies to the KCC District 3 area, alternate	II cementing
must be completed within 30 days of the spud date or the well shall be	33,891-C, which applies to the KCC District 3 area, alternate plugged. <i>In all cases, NOTIFY district office</i> prior to any c	II cementing
Or pursuant to Appendix "B" - Eastern Kansas surface casing order #15 must be completed within 30 days of the spud date or the well shall be I hereby certify that the statements made herein are true and to the best of m	33,891-C, which applies to the KCC District 3 area, alternate plugged. <i>In all cases, NOTIFY district office</i> prior to any c	II cementing
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must be completed within 30 days of the spud date or the well shall be I hereby certify that the statements made herein are true and to the best of m  Date: 4-26-12  Signature of Operator or Agent: For KCC Use ONLY	33,891-C, which applies to the KCC District 3 area, alternate plugged. <i>In all cases, NOTIFY district office</i> prior to any cyknowledge and belief.  Title: agent  Remember to:	II cementing ementing.
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must be completed within 30 days of the spud date or the well shall be I hereby certify that the statements made herein are true and to the best of m Date: 4-26-12 Signature of Operator or Agent: Signature of Operator or Agent: API # 15 - 23830-000	33,891-C, which applies to the KCC District 3 area, alternate plugged. In all cases, NOTIFY district office prior to any converse with the Kansas Surface Ow	II cementing ementing.
must be completed within 30 days of the spud date or the well shall be I hereby certify that the statements made herein are true and to the best of m Date: 4-26-12 Signature of Operator or Agent: Signature of Operator or Agent: API # 15 - 065-23830-000 Conductor pipe required feet	33,891-C, which applies to the KCC District 3 area, alternate plugged. In all cases, NOTIFY district office prior to any converse with the Kansas Surface Ow Act (KSONA-1) with Intent to Drill;	II cementing ementing.
must be completed within 30 days of the spud date or the well shall be I hereby certify that the statements made herein are true and to the best of m Date: 4-26-12 Signature of Operator or Agent: Signature of Operator or Agent: API # 15 - 23830-000	Remember to:  File Certification of Compliance with the Kansas Surface Ow Act (KSONA-1) with Intent to Drill;  File Completion Form ACO-1 within 120 days of spud date;  File acreage attribution plat according to field proration order	Il cementing ementing.  ner Notification   s;
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must be completed within 30 days of the spud date or the well shall be I hereby certify that the statements made herein are true and to the best of model.  Date: 4-26-12 Signature of Operator or Agent: 15.00  For KCC Use ONLY  API # 15 - 065-23830-000  Conductor pipe required 100 feet per ALT. 101  Approved by: 110-110-110-1100-1100-1100-1100-1100-1	Remember to:  File Certification of Compliance with the Kansas Surface Ow Act (KSONA-1) with Intent to Drill; File Completion Form ACO-1 within 120 days of spud date; File acreage attribution plat according to field proration order.  Notify appropriate district office 48 hours prior to workover or Submit plugging report (CP-4) after plugging is completed (w	Il cementing ementing.  ner Notification
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must be completed within 30 days of the spud date or the well shall be I hereby certify that the statements made herein are true and to the best of model.  Date: 4-26-12 Signature of Operator or Agent: Signature of Operato	Remember to:  File Certification of Compliance with the Kansas Surface Ow Act (KSONA-1) with Intent to Drill;  File Drill Pit Application (form CDP-1) with Intent to Drill;  File acreage attribution plat according to field proration order  Notify appropriate district office 48 hours prior to workover or Submit plugging report (CP-4) after plugging is completed (working to Main Will will not be drilled or Permit Expired Date:  Well will not be drilled or Permit Expired Date:  Well will not be drilled or Permit Expired Date:  Well will not be drilled or Permit Expired Date:	Il cementing ementing.  ner Notification  s; re-entry; rithin 60 days); er. d expiration date)

For KCC Use ONLY API#15 - 065-23830-0000

#### 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: WM KS Energy Resources, LLC	Location of Well: County: Graham			
Lease: Shaw				
Well Number: 1				
Field: Morel	Sec. 7 Twp. 9 S. R. 21 E X W			
Number of Acres attributable to well: 160	Is Section: Regular or Irregular			
QTR/QTR/QTR/QTR of acreage:nw nw nw				
	If Section is Irregular, locate well from nearest corner boundary.  Section corner used: NE NW SE SW			
PL	AT			
Show location of the well. Show footage to the nearest le	ase or unit boundary line. Show the predicted locations of			
lease roads, tank batteries, pipelines and electrical lines, as requ	uired by the Kansas Surface Owner Notice Act (House Bill 2032).			
You may attach a se	parate plat if desired.			
330				
330	LEGEND			
	O Well Location			
	Tank Battery Location			



# **EXAMPLE** 1980' FSL

SEWARD CO. 3390' FEL

Pipeline Location - Electric Line Location Lease Road Location

APR 3 0 2012

RECEIVED

#### 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;
- 5. The predicted locations of lease roads, tank batteries, pipelines, and electrical lines.

#### 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 # 34559	Well Location:	
Name: WM KS Energy Resources, LLC	<u>nw_nw_nw_Sec7Twp9sR.</u>	21 Fas X West
Name: WM KS Energy Resources, LLC  Address 1: P.O. Box H		
Address 2:	County: Graham Lease Name: Shaw	Well #: 1
City: Plainville State: KS Zip: 67663 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description	
Contact Person: Bill Robinson	the lease below:	
Phone: ( 785 ) 688-4040 Fax: ( )	_	
Email Address:		
Surface Owner Information:		MANAGEMENT CONTROL CON
Name: Jack Foster	When filing a Form T-1 involving multiple surface ow	
Name: Jack Foster  Address 1: 34205 North 43rd St.  Address 2:	sheet listing all of the information to the left for each owner information can be found in the records of the	
Address 2:	county, and in the real estate property tax records of	
City: Cave Creek State: AZ Zip: 85331 +	_	
		tions shown on the plat
Select one of the following:	d on the Form C-1 plat, Form CB-1 plat, or a separate	
	d on the Form C-1 plat, Form CB-1 plat, or a separate etc.  e Act (House Bill 2032), I have provided the following located: 1) a copy of the Form C-1, Form CB-1, Form being filed is a Form C-1 or Form CB-1, the plat(s)	plat may be submitted.  g to the surface orm T-1, or 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	d on the Form C-1 plat, Form CB-1 plat, or a separate the Act (House Bill 2032), I have provided the following the located: 1) a copy of the Form C-1, Form CB-1, Form being filed is a Form C-1 or Form CB-1, the plat(s) ax, and email address.  I acknowledge that, because I have not provided this exponents. To mitigate the additional cost of the KCC	g to the surface orm T-1, or Form required by this information, the performing 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 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.	d on the Form C-1 plat, Form CB-1 plat, or a separate e Act (House Bill 2032), I have provided the following be located: 1) a copy of the Form C-1, Form CB-1, Form being filed is a Form C-1 or Form CB-1, the plat(s) ax, and email address.  I acknowledge that, because I have not provided this e owner(s). To mitigate the additional cost of the KCC ling fee, payable to the KCC, which is enclosed with the ling fee with this form. If the fee is not received with the	g to the surface orm T-1, or Form required by this information, the performing this nis form.
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 for 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 task, I acknowledge that I am being charged a \$30.00 hand.  If choosing the second option, submit payment of the \$30.00 hand.	d on the Form C-1 plat, Form CB-1 plat, or a separate e Act (House Bill 2032), I have provided the following be located: 1) a copy of the Form C-1, Form CB-1, Form being filed is a Form C-1 or Form CB-1, the plat(s) ax, and email address.  I acknowledge that, because I have not provided this e owner(s). To mitigate the additional cost of the KCC ling fee, payable to the KCC, which is enclosed with the ling fee with this form. If the fee is not received with the CP-1 will be returned.	g to the surface orm T-1, or Form required by this information, the performing this nis form.
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#### 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 Resources, 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.: Shaw 1		Pit Location (QQQQ):		
Type of Pit:  Emergency Pit  Settling Pit  Workover Pit  (If WP Supply API No. or Year Drilled)  Is the pit located in a Sensitive Ground Water A	Pit is:    X   Proposed   Existing     If Existing, date constructed:		Sec7Twp9R21 East _X West	
Is the bottom below ground level?  XYes No	Artificial Liner?	No	How is the pit lined if a plastic liner is not used? bentonite mud & clay	
Pit dimensions (all but working pits):65Length (feet)5 (feet)N/A: Steel Pits  Depth from ground level to deepest point:5 (feet)No Pit  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.				
Distance to nearest water well within one-mile of pit:  Depth to shallor Source of inforr		west fresh water150 feet. mation:		
NA feet Depth of water wellfeet		measured	well owner electric log KDWR	
Emergency, Settling and Burn Pits ONLY: Drilling, Works		Drilling, Worko	over and Haul-Off Pits ONLY:	
Producing Formation: Type of materia		d well owner electric log KDWR  kover and Haul-Off Pits ONLY:  rial utilized in drilling/workover:		
Number of producing wells on lease: Number of work		king pits to be utilized:		
Barrels of fluid produced daily: Abandonment p		procedure: allow pits to dry by evaporation then backfill		
Does the slope from the tank battery allow all spilled fluids to flow into the pit? Yes No Drill pits must		Drill pits must b	e closed within 365 days of spud date.	
I hereby certify that the above statement	ents are true and corr	rect to the best of r		
4-26-12 Date		B vo Sig	gnature of Applicant or Agent KCC WICHIT	
KCC OFFICE USE ONLY  Liner Steel Pit RFAC RFAS				
Date Received: 4-30-12 Permit Number: Permit Date: 5-1-12 Lease Inspection: Yes No				