

Residential Gas well

For KCC Use: 4-19-2015
Effective Date: 3
District # _____
SGA? Yes No

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form C-1
July 2014

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: 4/25/2015
month day year

OPERATOR: License# 35101 ✓
Name: LORENZO J. JENSEN
Address 1: P.O. BOX 821
Address 2: _____
City: IOLA State: KS Zip: 66749 + _____
Contact Person: DAVID KIMZEY
Phone: 620-496-6257
CONTRACTOR: License# 33977 ✓
Name: EK ENERGY LLC

Spot Description: NE 1/2 OF NE 1/4
- NE - NE - NE Sec. 26 Twp. 23 S. R. 18 E W
(a/a/a/a) 4,950 ✓ feet from N / S Line of Section
330 feet from E / W Line of Section
Is SECTION: Regular Irregular?

(Note: Locate well on the Section Plat on reverse side)

County: ALLEN
Lease Name: JENSEN Well #: G-1
Field Name: IAA Unnamed
Is this a Prorated / Spaced Field? Yes No ✓
Target Formation(s): MISSISSIPPI ✓

Nearest Lease or unit boundary line (in footage): 330 ✓
Ground Surface Elevation: NA 1033 est feet MSL
Water well within one-quarter mile: Yes No
Public water supply well within one mile: Yes No
Depth to bottom of fresh water: 150 50
Depth to bottom of usable water: 100 150
Surface Pipe by Alternate: I II ✓
Length of Surface Pipe Planned to be set: 20 ✓
Length of Conductor Pipe (if any): _____
Projected Total Depth: 1100 ✓
Formation at Total Depth: LIME

Water Source for Drilling Operations:
 Well Farm Pond Other: _____
DWR Permit #: _____
(Note: Apply for Permit with DWR) ✓
Will Cores be taken? Yes No
If Yes, proposed zone: _____

Well Drilled For: Oil Gas ✓
 Enh Rec Storage Disposal
 Seismic; # of Holes _____
 Other: GAS WELL FOR HOME
Well Class: Infield Pool Ext. Wildcat Other
Type Equipment: Mud Rotary ✓
 Air Rotary Cable
 If OWWO: old well information as follows: _____

Operator: _____
Well Name: _____
Original Completion Date: _____ Original Total Depth: _____
Directional, Deviated or Horizontal well received Yes No
If Yes, true vertical depth: _____
Bottom Hole Location: _____
KCC DKT #: APR 13 2015

CONSERVATION DIVISION
WICHITA, KS

AFFIDAVIT

The undersigned hereby affirms that the drilling, completion and eventual plugging of this well will comply with K.S.A. 55 et. seq.
It is agreed that the following minimum requirements will be met:

1. Notify the appropriate district office **prior** to spudding of well;
2. A copy of the approved notice of intent to drill **shall be posted** on each drilling rig;
3. The minimum amount of surface pipe as specified below **shall be set** by circulating cement to the top; in all cases surface pipe **shall be set** 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 district office on plug length and placement is necessary **prior to plugging**;
5. The appropriate district office will be notified before well is either plugged 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 DAYS** of spud date. Or pursuant to Appendix "B" - Eastern Kansas surface casing order #133,891-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 plugged. **In all cases, NOTIFY district office** prior to any cementing.

I hereby certify that the statements made herein are true and to the best of my knowledge and belief.

Date: 3/29/15 Signature of Operator or Agent: David Kimzey Title: Agent

For KCC Use ONLY
API # 15 - 001-31366-0000
Conductor pipe required None feet
Minimum surface pipe required 20 feet per ALT. I II
Approved by: Paul 4-14-2015
This authorization expires: 4-14-2016
(This authorization void if drilling not started within 12 months of approval date.)
Spud date: _____ Agent: _____

- Remember to:
- File Certification of Compliance with the Kansas Surface Owner Notification Act (KSONA-1) with Intent to Drill;
 - File Drill Pit Application (form CDP-1) with Intent to Drill;
 - File Completion Form ACO-1 within 120 days of spud date;
 - File acreage attribution plat according to field proration orders;
 - Notify appropriate district office 48 hours prior to workover or re-entry;
 - Submit plugging report (CP-4) after plugging is completed (within 60 days);
 - Obtain written approval before disposing or injecting salt water.
 - If well will not be drilled or permit has expired (See: authorized expiration date) please check the box below and return to the address below.
- Well will not be drilled or Permit Expired Date: _____
Signature of Operator or Agent: _____

Mail to: KCC - Conservation Division,
266 N Main St, Ste 220, Wichita, KS 67202-1513

26
23
18
 E W

For KCC Use ONLY

API # 15 - 001-31366-0000

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: LORENZO J. JENSEN
Lease: JENSEN
Well Number: G-1
Field: IOLA

Location of Well: County: ALLEN
4,950 feet from N / S Line of Section
330 feet from E / W Line of Section
Sec. 26 Twp. 23 S. R. 18 E W

Number of Acres attributable to well:
QTR/QTR/QTR/QTR of acreage: - NE - NE - NE

Is Section: Regular or Irregular

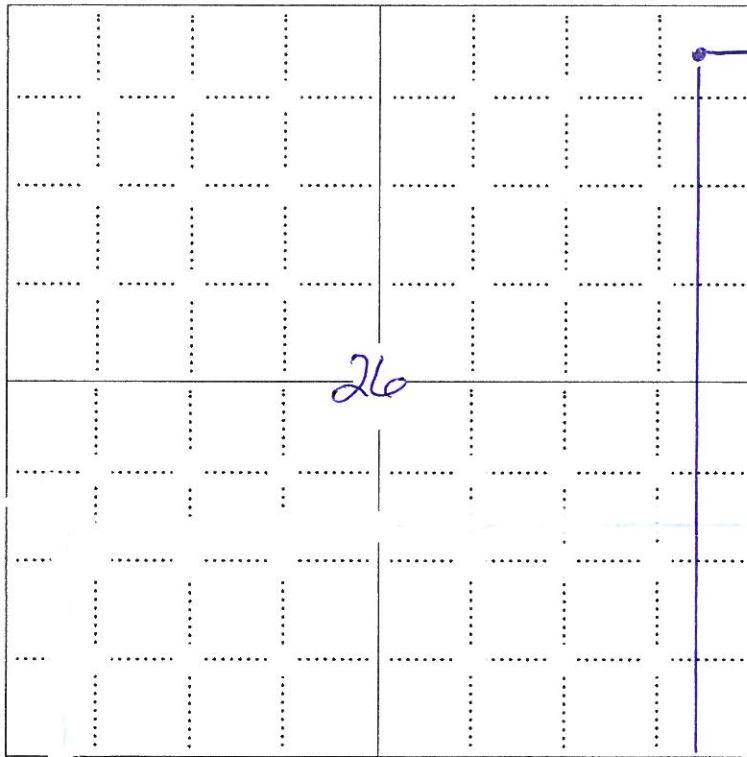
If Section is Irregular, locate well from nearest corner boundary.

Section corner used: NE NW SE SW

PLAT

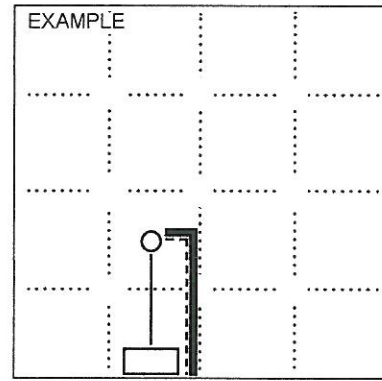
Show location of the well. Show footage to the nearest lease or unit boundary line. Show the predicted locations of lease roads, tank batteries, pipelines and electrical lines, as required by the Kansas Surface Owner Notice Act (House Bill 2032).

You may attach a separate plat if desired.



4950 PSL
330 FEL

- LEGEND
Well Location
Tank Battery Location
Pipeline Location
Electric Line Location
Lease Road Location



SEWARD CO. 3390' FEL

1980' FSL

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

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: (CO-7 for oil wells; CG-8 for gas wells).
5. The predicted locations of lease roads, tank batteries, pipelines, and electrical lines.

Received KANSAS CORPORATION COMMISSION

APR 13 2015

CONSERVATION DIVISION WICHITA, KS

15-001-31366-0000

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form KSONA-1
July 2014
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 # 35101
Name: LORENZO J. JENSEN
Address 1: P.O. BOX 821
Address 2: _____
City: IOLA State: KS Zip: 66749 + _____
Contact Person: DAVID KIMZEY
Phone: (620) 496-6257 Fax: (_____) _____
Email Address: _____

Well Location:
____ NE NE NE Sec. 26 Twp. 23 S. R. 18 East West
County: ALLEN
Lease Name: JENSEN Well #: G-1

If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:

Received
KANSAS CORPORATION COMMISSION

Surface Owner Information:

APR 13 2015

Name: JUSTIN JENSEN
Address 1: P.O. BOX 821
Address 2: _____
City: IOLA State: KS Zip: 66749 + _____

CONSERVATION DIVISION
WICHITA, KS

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 county, and in the real estate property tax records of the county treasurer.

If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered 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 Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 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 being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address.

I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I must provide the name and address of the surface owner by filling out the top section of this form and that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.

If choosing the second option, submit payment of the \$30.00 handling fee with this form. If the fee is not received with this form, the KSONA-1 form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-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: 3/29/15 Signature of Operator or Agent: David Kinzey Title: Agent


15-001-31366-0000

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form GDP-1
July 2014
Form must be Typed

APPLICATION FOR SURFACE PIT

Submit in Duplicate

Operator Name: LORENZO J. JENSEN		License Number: 35101	
Operator Address: P.O. BOX 821		IOLA KS 66749	
Contact Person: DAVID KIMZEY		Phone Number: 620-496-6257	
Lease Name & Well No.: JENSEN G-1		Pit Location (QQQQ): _____ - NE - NE - NE Sec. 26 Twp. 23 R. 18 <input checked="" type="checkbox"/> East <input type="checkbox"/> West 4,950 Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section 330 Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section ALLEN _____ County	
Type of Pit: <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Burn Pit <input type="checkbox"/> Settling Pit <input checked="" type="checkbox"/> Drilling Pit <input type="checkbox"/> Workover Pit <input type="checkbox"/> Haul-Off Pit <i>(If WP Supply API No. or Year Drilled)</i>	Pit is: <input checked="" type="checkbox"/> Proposed <input type="checkbox"/> Existing If Existing, date constructed: _____ Pit capacity: 210 _____ (bbls)		
Is the pit located in a Sensitive Ground Water Area? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Chloride concentration: _____ mg/l <i>(For Emergency Pits and Settling Pits only)</i>	
Is the bottom below ground level? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Artificial Liner? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	How is the pit lined if a plastic liner is not used? CLAY PACKED	
Pit dimensions (all but working pits): 30 Length (feet) 8 Width (feet) Depth from ground level to deepest point: 5 (feet)		<input type="checkbox"/> N/A: Steel Pits <input type="checkbox"/> No Pit	
If the pit is lined give a brief description of the liner material, thickness and installation procedure. <p style="text-align: center;">Received KANSAS CORPORATION COMMISSION APR 13 2015 CONSERVATION DIVISION WICHITA, KS</p>		Describe procedures for periodic maintenance and determining liner integrity, including any special monitoring.	
Distance to nearest water well within one-mile of pit: N/A feet Depth of water well _____ feet	Depth to shallowest fresh water _____ feet Source of information: <input type="checkbox"/> measured <input type="checkbox"/> well owner <input type="checkbox"/> electric log <input type="checkbox"/> KDWR		
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 spilled fluids to flow into the pit? <input type="checkbox"/> Yes <input type="checkbox"/> No	Drilling, Workover and Haul-Off Pits ONLY: Type of material utilized in drilling/workover: NATIVE MUD Number of working pits to be utilized: 2 Abandonment procedure: AIR DRY BACKFILL 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.			
3-29-15 Date		 Signature of Applicant or Agent	

KCC OFFICE USE ONLY			
Date Received: 4/13/15	Permit Number: _____	Permit Date: 4/13/15	Lease Inspection: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		<input type="checkbox"/> Liner <input type="checkbox"/> Steel Pit <input type="checkbox"/> RFAC <input type="checkbox"/> RFAS	

Mail to: KCC - Conservation Division, 266 N Main St, Ste 220, Wichita, KS 67202-1513