

For KCC Use:
Effective Date: _____
District # _____
SGA? Yes No

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CB-1
December 2008
Form must be Typed
Form must be Signed
All blanks must be Filled

CATHODIC PROTECTION BOREHOLE INTENT

Must be approved by the KCC sixty (60) days prior to commencing well.

Expected Spud Date: _____
month day year

OPERATOR: License# _____
Name: _____
Address 1: _____
Address 2: _____
City: _____ State: _____ Zip: _____ + _____
Contact Person: _____
Phone: _____

CONTRACTOR: License# _____
Name: _____
Type Drilling Equipment: Mud Rotary Cable
 Air Rotary Other

Construction Features

Length of Cathodic Surface (Non-Metallic) Casing
Planned to be set: _____ feet
Length of Conductor pipe (if any): _____ feet
Surface casing borehole size: _____ inches
Cathodic surface casing size: _____ inches
Cathodic surface casing centralizers set at depths of: _____ ; _____ ;
_____ ; _____ ; _____ ; _____ ; _____ ; _____ ; _____ ;
Cathodic surface casing will terminate at:
 Above surface Surface Vault Below Surface Vault
Pitless casing adaptor will be used: Yes No Depth _____ feet
Anode installation depths are: _____ ; _____ ; _____ ; _____ ; _____ ;
_____ ; _____ ; _____ ; _____ ; _____ ; _____ ; _____ ; _____ ;

AFFIDAVIT

The undersigned hereby affirms that the drilling, completion and eventual plugging of this well will comply with K.S.A. 55-101 et. seq.

It is agreed that the following minimum requirements will be met:

1. Notify the appropriate District office prior to spudding and again before plugging the well. An agreement between the operator and the District Office on plugs and placement is necessary prior to plugging. In all cases, notify District Office prior to any grouting.
2. Notify appropriate District Office 48 hours prior to workover or re-entry.
3. A copy of the approved notice of intent to drill shall be posted on each drilling rig.
4. The minimum amount of cathodic surface casing as specified below shall be set by grouting to the top when the cathodic surface casing is set.
5. File all required forms: a. File Drill Pit Application (form CDP-1) with Intent to Drill (form CB-1). b. File Completion Form (ACO-1) within 30 days from spud date. c. Submit plugging report (CP-4) within 30 days after final plugging is completed.

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

Date: _____ Signature of Operator or Agent: _____ Title: _____

Spot Description: _____
_____ - _____ - _____ - _____ Sec. _____ Twp. _____ S. R. _____ E W
(a/a/a/a) _____ feet from N / S Line of Section
_____ feet from E / W Line of Section

Is SECTION: Regular Irregular?
(Check directions from nearest outside corner boundaries)

County: _____
Facility Name: _____
Borehole Number: _____
Ground Surface Elevation: _____ MSL
Cathodic Borehole Total Depth: _____ feet
Depth to Bedrock: _____ feet

Water Information

Aquifer Penetration: None Single Multiple
Depth to bottom of fresh water: _____
Depth to bottom of usable water: _____
Water well within one-quarter mile: Yes No
Public water supply well within one mile: Yes No
Water Source for Drilling Operations:
 Well Farm Pond Stream Other
Water Well Location: _____
DWR Permit # _____
Standard Dimension Ratio (SDR) is = _____
(Cathodic surface csg. O.D. in inches / MWT in inches = SDR)
Annular space between borehole and casing will be grouted with:
 Concrete Neat Cement Bentonite Cement Bentonite Clay
Anode vent pipe will be set at: _____ feet above surface
Anode conductor (backfill) material TYPE: _____
Depth of BASE of Backfill installation material: _____
Depth of TOP of Backfill installation material: _____
Borehole will be Pre-Plugged? Yes No

For KCC Use ONLY
API # 15 - _____
Conductor pipe required _____ feet
Minimum Cathodic Surface Casing Required: _____ feet
Approved by: _____
This authorization expires: _____
(This authorization void if drilling not started within 12 months of approval date.)
Spud date: _____ Agent: _____

If this permit has expired or will not be drilled, check a box below, sign, date and return to the address below.

Permit Expired Well Not Drilled

_____ Date _____ Signature of Operator or Agent

IN ALL CASES PLOT THE INTENDED WELL ON THE PLAT BELOW

Show the relationship to the other wells or facilities proposed to be serviced by the intended cathodic borehole. Please show all wells, existing cathodic boreholes, pipelines or facilities within 1/2 mile of the proposed borehole.

API No. 15 - _____
 Operator: _____
 Facility Name: _____
 Borehole Number: _____

Location of Well: County: _____
 _____ feet from N / S Line of Section
 _____ feet from E / W Line of Section
 Sec. _____ Twp. _____ S. R. _____ E W

Is Section: Regular or Irregular

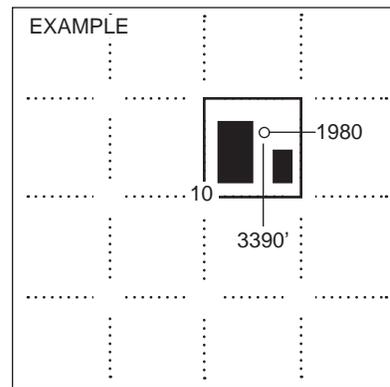
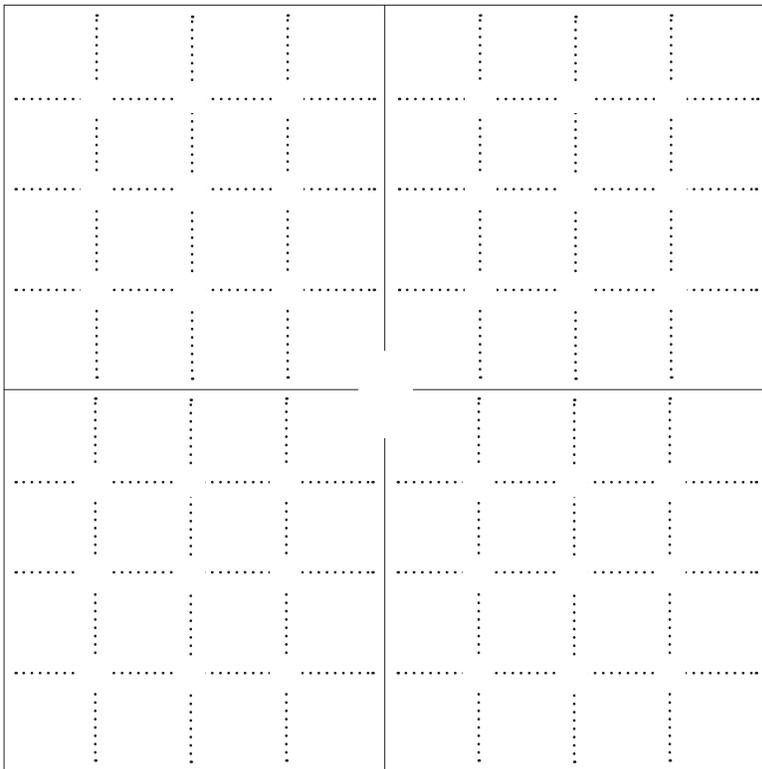
If Section is Irregular, locate well from nearest corner boundary.

Section corner used: NE NW SE SW

PLAT

(Show location of intended cathodic borehole)

(Show footage to the nearest lease, unit or outside section boundary line.)



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 section's south / north and east / west; line.

**KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
APPLICATION FOR SURFACE PIT**

Form CDP-1
April 2004
Form must be Typed

Submit in Duplicate

Operator Name: _____		License Number: _____	
Operator Address: _____			
Contact Person: _____		Phone Number: _____	
Lease Name & Well No.: _____		Pit Location (QQQQ): _____ - _____ - _____ - _____	
Type of Pit: <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Burn Pit <input type="checkbox"/> Settling Pit <input 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 type="checkbox"/> Proposed <input type="checkbox"/> Existing If Existing, date constructed: _____ Pit capacity: _____ (bbls)	
Is the pit located in a Sensitive Ground Water Area? <input type="checkbox"/> Yes <input type="checkbox"/> No		Chloride concentration: _____ mg/l <i>(For Emergency Pits and Settling Pits only)</i>	
Is the bottom below ground level? <input type="checkbox"/> Yes <input type="checkbox"/> No		Artificial Liner? <input type="checkbox"/> Yes <input type="checkbox"/> No	
How is the pit lined if a plastic liner is not used? _____			
Pit dimensions (all but working pits): _____ Length (feet) _____ Width (feet) _____ N/A: Steel Pits Depth from ground level to deepest point: _____ (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 _____ feet Depth of water well _____ feet		Depth to shallowest fresh water _____ feet. Source of information: _____ measured _____ well owner _____ electric log _____ 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: _____ Number of working pits to be utilized: _____ Abandonment procedure: _____ _____ 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.			
_____ Date		_____ Signature of Applicant or Agent	

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