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

If OWWO: old well information as follows:

Directional, Deviated or Horizontal wellbore?

If Yes, true vertical depth: Bottom Hole Location: KCC DKT #:\_

For KCC Use ONLY

Expected Spud Date

City/State/Zip:

Name: MURFIN

## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

SEP 0 2 2005

RECEIVED

Form C-1

December 2002 Form must be Typed Form must be Signed

# NOTICE OF INTENT TO DRILL

LACC INICLITAN blanks must be Filled Must be approved by KCC fi

44 <u> </u>	8	7	3005	Spot 130'N & 150'W	[
sted Spud Date	month	dey	year		Eas
		ua,	you	CSWsec. 9_Twp. 16_s. R. 1450 feet from \[ \backslash N / \backslash S. R.	
ATOR: License#	5259			1450	
	PERATIONS	, INC.			Une of Section
ss: P.O. BO				Is SECTION X Regular Irregular?	
tate/Zip: RUSS		67665		(Note: Locate well on the Section Plat on reverse	side)
ct Person: ALL		T		County: BARTON	
<u>: 785 483</u>	2169				el #: 2 <b>-</b> 9
	30606			Field Name: WILDCAT	
RACTOR: License#- MURFIN DR		O., INC		Is this a Prorated / Spaced Field?	Yes X
				Target Formation(s): ARBUCKLE	
Well Drilled For:	Well Class:	Type E	quipment:	Nearest Lease or unit boundary: 11701	
Oi Enh Re		-	ud Rotary	Ground Surface Elevation: 1829	feet MS
Gas Storag			Rotary	Water well within one-quarter mile:	Yes X
OWWO Dispos		=	ible	Public water supply well within one mile:	Yes X
Selamic;# of !	<u> </u>			3/01	
Other					
				Surface Pipe by Alternate: X 1 2	
VO: old well information	tion as follows:			Length of Surface Pipe Planned to be set:	
				Projected Total Depth: 3360 t	
H Name:				Formation at Total Depth: ARBUCKLE	
iginal Completion Da	te:O	inginal Total [	Depth:/		
ional, Deviated or Ho	rizontal wellbore?		Yes X No	Water Source for Drilling Operations:  Well X Farm Pond Other	
true vertical depth:					
n Hole Location:				DWR Permit #: (Note: Apply for Permit with DWR )	
OKT #:					Yes X N
/Кі ж				Will Cores be taken?  If Yes, proposed zone:	Lies X
				11 103, proposite 2010.	
				IDAVIT	
ndersigned hereby a	ffirms that the drill	ing, complet	ion and eventual p	lugging of this well will comply with K.S.A. 55 et. seq.	
reed that the followi	ing minimum requi	rements will	be met:		
Notify the appropriat	te district office pr	ior to spudd	ing of well;	•	
A copy of the approv	ved notice of inten	it to drill <b>sha</b>	II be posted on ea	ch drilling rig;	
		•		et by circulating cement to the top; in all cases surface pipe	shall be set
				he underlying formation.	
•				sistrict office on plug length and placement is necessary price	or to plugging;
				gged or production casing is cemented in;	of soud data
				ted from below any usable water to surface within 120 days #133,891-C, which applies to the KCC District 3 area, alter	
				be plugged. In all cases, NOTIFY district office prior to an	
-	-	-		f my knowledge and belief.	
	and the state of the	5	///		
8 <b>-</b> 31 <b>-</b> 05	Signature of O	perator or A	/ LC	len Langer Title: PROD. SI	JPT.
			gent:		
			gent:	-	
KCC Use ONLY			gent:	Remember to:	
r KCC Use ONLY		-00-	gent	-	

API # 15 - 000 -24870-00 NONE Conductor pipe required Minimum surface pipe required\_ Approved by RTP9-6-05 This authorization expires: 3-11-06 (This authorization void if drilling not started within 6 months of effective date.) Soud date: Agent:

Notify appropriate district office 48 hours prior to workover or re-entry;

Submit plugging report (CP-4) after plugging is completed;

Date:

Obtain written approval before disposing or injecting salt water

If this permit has expired (See: authorized expiration date) please check the box below and return to the address below.

Well Not Drilled - Permit Expired Signature of Operator or Agent:

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

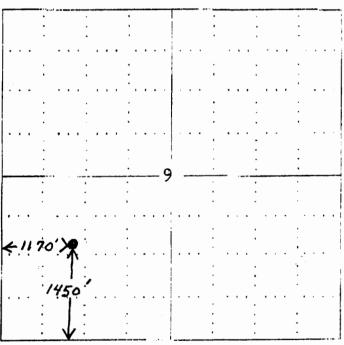
Plat of acreage attributable to a well in a prorated or spaced field

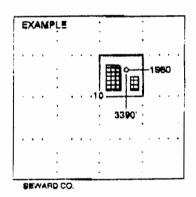
If the intended well is in a prorated or spaced field, please fully complete this side of the form. If the intended well is in a prorated or spaced field complete the plat below showing that the well will be properly located in relationship to other wells producing from the common source of supply. Please show all the wells and within 1 mile of the boundaries of the proposed acreage attribution unit for gas wells and within 1/2 mile of the boundaries of the proposed acreage attribution unit for oil wells.

API No. 18 - Operator: MAI OIL OPERATIONS, INC. Lease: HOFFMAN RANCH Well Number: 2-9	Location of Well: County: BARTON  1450 feet from E / X s Line of Section  1170 feet from E / X w Line of Section  Sec. 9 Twp. 16 s. R.1 East West
Number of Agree attributable to well:  OTR / QTR / QTR of agreege:	Is Section: Regular or Imagular  If Section is irregular, locate well from nearest corner boundary.  Section corner used: NE NW SE SW

PLAT

(Show location of the well and shade attributable acreage for prorated or spaced wells.)
(Show locates to the nearest lease or unit boundary line.)





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

### in plotting the proposed location of the well, you must show:

- The manner in which you are using the depicted plat by identifying section lines, ..e. 1 section, 1 section with 8 surrounding sections.
   4 sections, etc.
- 2 The distance of the proposed diffling location from the section's south / north and east / west.
- 3. The distance to the nearest lease or unit boundary line
- 4. If proposed location is located within a prorated or epaced field a certificate of acreage attribution plat must be attached: (CO-7 for O1 wells) CG-8 for gas wells).

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