K

| For KCC Use: | 9-13-05 | Kansas Corpo | RATION COMMISSION SEE 9 200 Form to | | |
|---|-----------------------|--|--|--|--|
| Effective Date: | | OIL & GAS CON | SERVATION DIVISION | | |
| District # | 4 | | Form must be type | | |
| SGA? Tes ATNO- | EGTED M | | NTENT TO DRILL CO WAS Form must be Sign e (5) days prior to commencing well | | |
| Expected Spud Date | September | 21 2005 | Spot | | |
| | month | day year | 56 NW SE Sec. 2 Twp. 19 S. R. 15 We | | |
| OPERATOR: License#_ | 6039 | / | 820 feet from N / S Line of Section | | |
| Name: L. D. DRILLI | NG, INC. | | 760feet from ✓ E / W Line of Section ✓ | | |
| 7 SW 26 AV | /E. | | Is SECTION ✓ RegularIrregular? | | |
| City/State/Zip: GREA | T BEND, KANSAS | 67530 | (Note: Locate well on the Section Plat on reverse side) | | |
| Contact Person: L. D. | DAVIS | | County: BARTON | | |
| Phone: 620-793-3051 | | | Lease Name: BLANKENSHIP well #:2 | | |
| | , e | TECHNICO | Field Name: OTIS-ALBERT | | |
| CONTRACTOR: License | IOWN | TED VET | Is this a Prorated / Spaced Field? | | |
| Name: UNKN | | , | Target Formation(s): ARBUCKLE | | |
| Well Drilled For: | Well Class: | | | | |
| √ Oji Enh | _/ | | | | |
| Gas Stor | <u>*</u> | r | | | |
| OWWO Disp | · 🖳 | | | | |
| Seismic;# | | | | | |
| Other | | | | | |
| | | | | | |
| If OWWO: old well information as follows: | | | Length of Surface Pipe Planned to be set: NONF | | |
| Operator: | | | Design of Conductor Pipe required: | | |
| | | | Formation at Total Ponth: ARBUCKLE | | |
| Original Completion | Date:Orig | ginal Total Depth: | | | |
| Directional, Deviated or I | Horizontal wellbore? | Yes V No | Well Farm Pond Other HAULED | | |
| If Yes, true vertical depth | i | | | | |
| | | | | | |
| KCC DKT #: | | | | | |
| Expiration date was: 3 | 3-13-2006 (6 months | from effective date) | If Yes, proposed zone: | | |
| • | | | | | |
| | | | | | |
| | | | olugging of this well will comply with K.S.A. 55 et. seq. | | |
| • | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| 6. If an ALTERNATE | II COMPLETION, pro- | duction pipe shall be cemer | ited from below any usable water to surface within 120 days of spud date. | | |
| | | | | | |
| · | | | | | |
| Thereby certary that the | statetherns made nere | | | | |
| Date: 9/7/05 | Signature of Ope | rator or Agent: | Title: SEC/TREASURER | | |
| | | | Romambar to: | | |
| For KCC Hea ONLY | | | | | |
| For KCC Use ONLY | 248772.00 | 000 | File Completion Form ACO-1 within 120 days of sould date: | | |
| I . | | | | | |
| Conductor pipe required | NONE | Nearest Lease or unit boundary: 500" Nearest Lease or | | | |
| Minimum surface pipe r | <u></u> | | 1 | | |
| Approved by: RJG | 79.8.05/1 | RJP10-10-05 | | | |
| This authorization expire | 3-9-01 | | - It this permit has expired (See. authorized expiration date) please | | |
| aa | | | check the box below and return to the address below. | | |

(This authorization void if drilling not started within 6 months of offeetive date.)

... Agent:,

Spud date:

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

Date:

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