

CARD MUST BE TYPED

State of Kansas NOTICE OF INTENTION TO DRILL

CARD MUST BE SIGNED

(see rules on reverse side)

Starting Date: ~~5 days after approval~~
29 85
..... month day year

API Number 15- 121-26,668-00-00

OPERATOR: License # 5095
~~Gerald E. Williams Production Company~~
Name
Address P.O. Box 25830
City/State/Zip O.P., KS 66225
Contact Person Gerald E. Williams
Phone 913-451-6022

W 1/2 Sec NE East
(location) Sec 30.. Twp .1-6 S, Rge .2-2 West

CONTRACTOR: License # 5353
Name Bloomer Well Service
City/State Rantoul, KS 66079

3350..... Ft North from Southeast Corner of Section
2450..... Ft West from Southeast Corner of Section
(Note: Locate well on Section Plat on reverse side)

Nearest lease or unit boundary line 165..... feet.
County Miami.....
Lease Name .. McCann..... Well# 34.....

Well Drilled For:	Well Class:	Type Equipment:
<input checked="" type="checkbox"/> Oil <input type="checkbox"/> Swd	<input checked="" type="checkbox"/> Infield	<input type="checkbox"/> Mud Rotary
<input type="checkbox"/> Gas <input type="checkbox"/> Inj	<input type="checkbox"/> Pool Ext.	<input type="checkbox"/> Air Rotary
<input type="checkbox"/> OWWO <input type="checkbox"/> Expl	<input type="checkbox"/> Wildcat	<input type="checkbox"/> Cable

Domestic well within 330 feet: yes no
Municipal well within one mile: yes no

Depth to Bottom of fresh water ... 230..... feet
Lowest usable water formation
Depth to Bottom of usable water ... 200..... feet
Surface pipe by Alternate: 1 2
Surface pipe to be set 25..... feet
Conductor pipe if any required n/a..... feet
Ground surface elevation feet MSL
This Authorization Expires 3-19-86.....

Approved By 9-19-85
RCH/KDHE

If OWWO: old well info as follows:
Operator
Well Name
Comp Date Old Total Depth

Projected Total Depth	<u>750</u> feet
Projected Formation at TD	<u>700</u>
Expected Producing Formations	<u>squirrel</u>

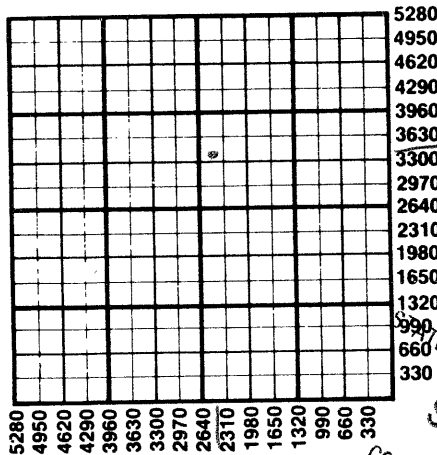
I certify that we will comply with K.S.A. 55-101, et seq., plus eventually plugging hole to K.C.C. specifications.

Date 9/10/85 Signature of Operator or Agent [Signature] Title owner/operator

**Must be filed with the K.C.C. five (5) days prior to commencing well
This card void if drilling not started within six (6) months of date received by K.C.C.**

Important procedures to follow :

**A Regular Section of Land
1 Mile = 5,280 Ft.**



1. Notify District office before setting surface casing.
2. Set surface casing by circulating cement to the top.
3. File completion forms ACO-1 with K.C.C. within 90 days of well completion, following instructions on ACO-1, side 1, and including copies of wireline logs.
4. Notify District office 48 hours prior to old well workover or re-entry.
5. Prior to plugging, prepare a plugging plan, then obtain agreement from the appropriate district office for an approved plugging plan.
6. Submit plugging report (CP-4) to K.C.C. after plugging is completed.
7. Obtain an approved injection docket number before disposing of salt water.
8. Notify K.C.C. within 10 days when injection commences or terminates.
9. If an alternate 2 completion, cement in the production pipe from below any usable water to surface within 120 days of spud date.

RECEIVED
 STATE CORPORATION COMMISSION
SEP 19 1985
 CONSERVATION DIVISION
 Wichita, Kansas

State Corporation Commission of Kansas
Conservation Division
200 Colorado Derby Building
Wichita, Kansas 67202
(316) 263-3238