

CARD MUST BE TYPED

State of Kansas

CARD MUST BE SIGNED

### NOTICE OF INTENTION TO DRILL

(see rules on reverse side)

Starting Date ..... 1 / 31 / 87 .....  
month day year

API Number 15— 121-26,788-0000

OPERATOR: License # ..... 6143 .....  
Name ..... Somerset Energy, Inc. ....  
Address ..... Rt. 4 .....  
City/State/Zip ..... Paola, KS. 66071 .....  
Contact Person ..... Lester Town .....  
Phone ..... 913.294-2125 .....

..... X East  
..SE SW SE.. Sec.20.. Twp..16. S, Rg..24... .. West  
..... 450..... Ft. from South Line of Section  
..... 1800..... Ft. from East Line of Section

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

CONTRACTOR: License # ..... #6142 .....  
Name ..... Rt. 4 .....  
City/State ..... Paola, KS. 66071 .....

Nearest lease or unit boundary line ..... 450 ..... feet  
County ..... Miami .....  
Lease Name ..... S. Hanson ..... Well # ..... S-123 .....

Well Drilled For: Well Class: Type Equipment:  
X Oil SWD X Infield X Mud Rotary  
Gas Inj Pool Ext. Air Rotary  
OWWO Expl Wildcat Cable

Ground surface elevation ..... feet MSL  
Domestic well within 330 feet: ..... yes X no  
Municipal well within one mile: ..... yes X no  
Surface pipe by Alternate: 1 2 X

If OWWO: old well info as follows:

Depth to bottom of fresh water ..... 230 .....  
Depth to bottom of usable water ..... 300 (Thr Kc Group) .....  
Surface pipe planned to be set ..... 20 .....  
Projected Total Depth ..... 400 ..... feet  
Formation ..... Peru .....

Operator .....  
Well Name .....  
Comp Date ..... Old Total Depth .....

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

Date ..... 1-21-87 ..... Signature of Operator or Agent ..... Donna Bensch ..... Title ..... Agent .....  
RTH/KC

For KCC Use:

Conductor Pipe Required ..... feet; Minimum Surface Pipe Required ..... 20 ..... feet per Alt. # 2  
This Authorization Expires ..... 7-26-87 ..... Approved By ..... 1-26-87 ..... R

