

CARD MUST BE TYPED

State of Kansas
NOTICE OF INTENTION TO DRILL
(see rules on reverse side)

CARD MUST BE SIGNED

Starting Date: 7/11/85
month day year 9:40

OPERATOR: License # 6251
Name Ballou Oil Well Service
Address Rt. 5, Box 159
City/State/Zip Paola, KS 66071
Contact Person Pat Ballou
Phone 913-294-4777

CONTRACTOR: License #
Name Co. tools
City/State

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

If OWWO: old well info as follows:
Operator
Well Name
Comp Date Old Total Depth 800
Projected Total Depth
Projected Formation at TD
Expected Producing Formations

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

Date 7/11/85 Signature of Operator or Agent Susan Arnold

API Number 15- 121-26,600-0000
NW SW NE 36 17 21 East
(location) Sec Twp S, Rge West
3795 Ft North from Southeast Corner of Section
5115 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 Saunders Well# 6

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

Depth to Bottom of fresh water 20-40' feet
Lowest usable water formation
Depth to Bottom of usable water 200 feet
Surface pipe by Alternate: 1 2
Surface pipe to be set 20 feet
Conductor pipe if any required feet
Ground surface elevation feet MSL
This Authorization Expires 7-11-86
Approved By 7-11-85 RCH for KOME

Title As. Agent

