

CARD MUST BE TYPED

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

CARD MUST BE SIGNED

Starting Date: .....12.....21.....1984.....  
month day year 10:30

OPERATOR: License # 7533  
Name Leo Blackstone  
Address Route 1,  
City/State/Zip Princeton, Ks 66078  
Contact Person Leo Blackstone  
Phone 913.878.3738

CONTRACTOR: License # 5666  
Name Finchs Drilling  
City/State Route 1, Box 125, Paola, Ks. 66071

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 .....  
Projected Total Depth 900 ..... feet  
Projected Formation at TD Mississippi  
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 12/20/84 Signature of Operator or Agent *Elvin Barber* Title as agent

*MHC/KOHE 12/19/84* Form C-1 4/84

API Number 15- 121-26,465-00-00  
C.E./N.E. S.E. Sec 11. Twp 17. S, Rge 22.  East  
(location)  West

1980  
330  
Ft North from Southeast Corner of Section  
Ft West from Southeast Corner of Section  
(Note: Locate well on Section Plat on reverse side)

Nearest lease or unit boundary line 330 feet.  
County Miami  
Lease Name Smith Well# 3  
Domestic well within 330 feet:  yes  no  
Municipal well within one mile:  yes  no

20  
Depth to Bottom of fresh water ..... 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 6-20-85  
Approved By 12-20-84 *R*

