

**CARD MUST BE SIGNED**

**Starting Date:** ..... June 18, 1985 .....

API Number 15- 059-23 933 -00-00

**OPERATOR:** License # ..... 8389 .....  
 Name ... Greenwood Resources Inc. ....  
 Address ... 315 Inverness Way South .....  
 City/State/Zip ... Englewood, CO 80112 .....  
 Contact Person ... Paul E. Poulsen .....  
 Phone ... 303-790-1266 .....

**CONTRACTOR:** License # ...5956.....  
 Name ...Gary Johnson Drilling.....  
 City/State Rt. 3, Iola, KS 66749

<b>Well Drilled For:</b>		<b>Well Class:</b>		<b>Type Equipment:</b>	
<input checked="" type="checkbox"/> Oil	<input type="checkbox"/> Swd	<input checked="" type="checkbox"/> Infield		<input checked="" 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	

**If OWWO: gld well info as follows:**

Operator .....  
Well Name .....  
Comp Date ..... Old Total Depth .....  
Projected Total Depth ..... 800 ..... feet  
Projected Formation at TD ..... Cherokee .....  
Expected Producing Formations ..... Squirrel .....

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

Date 6/1/85 Signature of Operator or Agent Paul E. Poulson Title \_\_\_\_\_

NW... NW... SW. Sec 24. Twp 15. S, Rge 20. ☒ East  
☐ West  
(location)

.....2170..... Ft North from Southeast Corner of Section  
.....5090..... Ft West from Southeast Corner of Section  
(Note: Locate well on Section Plat on reverse side)

Nearest lease or unit boundary line ..... 190 ..... feet.  
County ..... Franklin  
Lease Name Williams ..... Well# 17-M

**Domestic well within 330 feet :**      ☐ yes      ☒ no  
**Municipal well within one mile :**      ☐ yes      ☒ no

Depth to Bottom of fresh water ..... 0 - 100 ..... feet  
Lowest usable water formation ..... Lansing .....  
Depth to Bottom of usable water ..... 256 ..... feet  
Surface pipe by Alternate:    1 ☐    2 ☒  
Surface pipe to be set ..... 20 ..... feet  
Conductor pipe if any required ..... N/A ..... feet  
Ground surface elevation ..... 1050 est. .... feet MSL  
This Authorization Expires ..... 12-18-85 .....  
Approved By ..... 6-18-85 B

MHC/KOHE 6-18-85  
Engineer

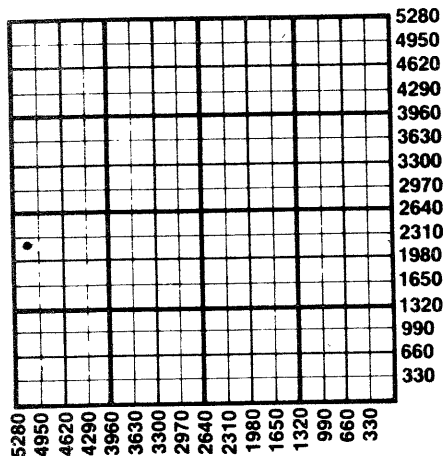
RECEIVED  
STATE CORPORATION COMMISSION

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.

JUN 18 1985

6-18-85

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



**Important procedures to follow:**

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.

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