## For KCC Use: 2-2 7- 06 3 SGA? Yes No

## Kansas Corporation Commission OIL & GAS CONSERVATION DIVISION

# **RECEIVED**

Form C-1 December 2002 Form must be Typed

## NOTICE OF INTENT TO DRILL

FEB 2 2 2006 Form must be Signed All blanks must be Filled

| Must be approved by KCC five                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | (5) days prior to commencing well KCC WICHITA                                                                                                                                                                                                                                           |                                                              |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|
| Expected Spud Date 2-28-06                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Spot                                                                                                                                                                                                                                                                                    | XEast                                                        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | SW-SE NW NE Sec. 14 Twp. 32 S.                                                                                                                                                                                                                                                          |                                                              |
| OPERATOR: License# 32756                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                         |                                                              |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                         | W Line of Section                                            |
| Name: Double 7 Oil and Gas                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Is SECTION Regular Irregular?                                                                                                                                                                                                                                                           |                                                              |
| Address: 21003 Wallace RD.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                         |                                                              |
| City/State/Zip: Parsons Ks - 67357                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | (Note: Locate well on the Section Plat on reve<br>County:Cherokee                                                                                                                                                                                                                       | -,                                                           |
| Contact Person: Bruce Schulz                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                         |                                                              |
| Phone: 620-423-0951                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Lease Name: Rennie Field Name:                                                                                                                                                                                                                                                          | well #: Od                                                   |
| CONTRACTOR: License# 32756                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Is this a Prorated / Spaced Field?                                                                                                                                                                                                                                                      | [] <sub>V</sub> _ [] <sub>V</sub>                            |
| Name: company tools                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Target Information(s): BXKXXXXXXXX Mi                                                                                                                                                                                                                                                   | Yes X No                                                     |
| • •                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Nearest Lease or unit boundary: 920                                                                                                                                                                                                                                                     | ,                                                            |
| Well Drilled For: Well Class: Type Equipment:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Ground Surface Elevation: N/A                                                                                                                                                                                                                                                           |                                                              |
| Oil / Enh Rec Infield Mud Rotary                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Water well within one-quarter mile:                                                                                                                                                                                                                                                     | Yes No                                                       |
| Gas Storage Pool Ext. X Air Rotary                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Public water supply well within one mile:                                                                                                                                                                                                                                               | Yes No                                                       |
| OWWO Disposal Wildcat Cable                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Depth to bottom of fresh water: 200+                                                                                                                                                                                                                                                    |                                                              |
| Seismic;# of Holes Other                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Depth to bottom of usable water: 300+                                                                                                                                                                                                                                                   |                                                              |
| Other                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Surface Pipe by Alternate: 1 2                                                                                                                                                                                                                                                          |                                                              |
| K OMMO, and well information on following                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Length of Surface Pipe Planned to be set:                                                                                                                                                                                                                                               |                                                              |
| If OWWO: old well information as follows:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Length of Conductor Pipe required:                                                                                                                                                                                                                                                      |                                                              |
| Operator:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Projected Total Depth: 🤼 🖁 🛣 🛣 🛣 🛣 🗴 500                                                                                                                                                                                                                                                |                                                              |
| Well Name:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Formation at Total DepthXRXXXXXXXXXX                                                                                                                                                                                                                                                    |                                                              |
| Original Completion Date:Original Total Depth:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Water Source for Drilling Operations:                                                                                                                                                                                                                                                   |                                                              |
| Directional, Deviated or Horizontal wellbore?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                         | · · · · · · · · · · · · · · · · · · ·                        |
| If Yes, true vertical depth:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | DWR Permit #:                                                                                                                                                                                                                                                                           |                                                              |
| Bottom Hole Location:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | (Note: Apply for Permit with DWR                                                                                                                                                                                                                                                        | 71                                                           |
| KCC DKT #:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Will Cores be taken?                                                                                                                                                                                                                                                                    | Yes C No-                                                    |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | If Yes, proposed zone:                                                                                                                                                                                                                                                                  |                                                              |
| AFF                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | FIDAVIT                                                                                                                                                                                                                                                                                 |                                                              |
| The undersigned hereby affirms that the drilling, completion and eventual p                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | olugging of this well will comply with K.S.A. 55 et. seq.                                                                                                                                                                                                                               |                                                              |
| It is agreed that the following minimum requirements will be met:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                         |                                                              |
| <ol> <li>Notify the appropriate district office <i>prior</i> to spudding of well;</li> <li>A copy of the approved notice of intent to drill <i>shall be</i> posted on ea</li> <li>The minimum amount of surface pipe as specified below <i>shall be s</i> through all unconsolidated materials plus a minimum of 20 feet into</li> <li>If the well is dry hole, an agreement between the operator and the</li> <li>The appropriate district office will be notified before well is either plu</li> <li>If an ALTERNATE II COMPLETION, production pipe shall be cemer Or pursuant to Appendix "B" - Eastern Kansas surface casing orde must be completed within 30 days of the spud date or the well shall</li> </ol> | set by circulating cement to the top; in all cases surface pathe underlying formation.  district office on plug length and placement is necessary agged or production casing is cemented in; intelligent to surface within 120 or #133,891-C, which applies to the KCC District 3 area, | prior to plugging; lays of spud date. alternate II cementing |
| I hereby certify that the statements made herein are true and to the best                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | of my knowledge and belief.                                                                                                                                                                                                                                                             |                                                              |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                         |                                                              |
| Date: 2-2/-06 Signature of Operator or Agent: Su                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | W Serry Title: Duray                                                                                                                                                                                                                                                                    | e <sub>f</sub>                                               |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Remember to                                                                                                                                                                                                                                                                             |                                                              |
| For KCC Use ONLY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | - File Drill Pit Application (form CDP-1) with Intent to D                                                                                                                                                                                                                              | rill: .                                                      |
| API # 15 - 021-20281-00-00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | - File Completion Form ACO-1 within 120 days of spu                                                                                                                                                                                                                                     | d date:                                                      |
| 11-11-                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | - File acreage attribution plat according to field prorat                                                                                                                                                                                                                               | ion orders;                                                  |
| 2-/                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | - Notify appropriate district office 48 hours prior to wo                                                                                                                                                                                                                               |                                                              |
| Minimum surface pipe required 26' feet per Alt. X 2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Submit plugging report (CP-4) after plugging is com                                                                                                                                                                                                                                     |                                                              |
| Approved by: $2PW$ 2-22-06                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | - Obtain written approval before disposing or injecting                                                                                                                                                                                                                                 | احا                                                          |
| This authorization expires: 8-22-06                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | - If this permit has expired (See: authorized expiration                                                                                                                                                                                                                                | date) please                                                 |
| (This authorization void if drilling not started within 6 months of effective date.)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | check the box below and return to the address belo                                                                                                                                                                                                                                      | w.                                                           |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Well Not Drilled - Permit Expired                                                                                                                                                                                                                                                       | 1.                                                           |
| Spud date: Agent::                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Signature of Operator or Agent:                                                                                                                                                                                                                                                         | ———— lp                                                      |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Dale:<br>D S. Market - Room 2078, Wichita, Kansas 67202                                                                                                                                                                                                                                 |                                                              |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                         |                                                              |

#### IN ALL CASES PLOT THE INTENDED WELL ON THE PLAT BELOW

Plat of acreage attributable to a well in a prorated or spaced field

If the intended well is in a prorated or spaced field, please fully complete this side of the form. If the intended well is in a prorated or spaced field complete the plat below showing that the well will be properly located in relationship to other wells producing from the common source of supply. Please show all the wells and within 1 mile of the boundaries of the proposed acreage attribution unit for gas wells and within 1/2 mile of the boundaries of the proposed acreage attribution unit for oil wells.

| Location of Well: County: feet from N / S Line of Sectionfeet from E / W Line of Section |  |
|------------------------------------------------------------------------------------------|--|
|                                                                                          |  |
| Sec Twp S. R East West                                                                   |  |
| Is Section: Regular or Irregular                                                         |  |
|                                                                                          |  |
|                                                                                          |  |

### PLAT

(Show location of the well and shade attributable acreage for prorated or spaced wells.)

(Show footage to the nearest lease or unit boundary line.)

|                                       | 0 - 1720 |
|---------------------------------------|----------|
| <br>                                  | :1 : :   |
|                                       | 4160     |
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| <br>                                  |          |
| <br>                                  |          |
| •                                     |          |

NOTE: In all cases locate the spot of the proposed drilling locaton.

#### In plotting the proposed location of the well, you must show:

- The manner in which you are using the depicted plat by identifying section lines, i.e. 1 section, 1 section with 8 surrounding sections, 4 sections, etc.
- 2. The distance of the proposed drilling location from the section's south / north and east / west.
- 3. The distance to the nearest lease or unit boundary line.
- 4. If proposed location is located within a prorated or spaced field a certificate of acreage attribution plat must be attached: (C0-7 for oil wells; CG-8 for gas wells).