

CARD MUST BE TYPED

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

CARD MUST BE SIGNED

Starting Date: ...7.....19.....1984.....
month day year

API Number 15- 059-23,617-00-00

OPERATOR: License # ...7060.....

...NE... Sec ..5. Twp .16 S, Rge ..20 East
(location) West

Name ...NOXXE.....

Address ...P.O. Box 127.....

...3660... Ft North from Southeast Corner of Section

City/State/Zip ...Ottawa, KS... 66067.....

...990... Ft West from Southeast Corner of Section

Contact Person ...Jose J. Martinez.....

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

Phone(913) 242-1645.....

Nearest lease or unit boundary line ...165..... feet.

CONTRACTOR: License #

CountyFranklin.....

NameCompany Tools.....

Lease Name ...Clark..... Well#2.....

City/State

Domestic well within 330 feet: yes No

Well Drilled For: Well Class: Type Equipment:

- Oil Swd Infield Mud Rotary
- Gas Inj Pool Ext. Air Rotary
- OWWO Expl Wildcat Cable

Municipal well within one mile: yes No

If OWWO: old well info as follows:

Depth to Bottom of fresh water ...20..... feet

Operator

Lowest usable water formation

Well Name

Depth to Bottom of usable water ...200..... feet

Comp Date Old Total Depth

Surface pipe by Alternate: 1 2 X

Projected Total Depth650..... feet

Surface pipe to be set ...20..... feet

Projected Formation at TD

Conductor pipe if any required

Expected Producing Formations

Ground surface elevation

This Authorization Expires

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

Approved By *REH/KCC 7-18-84*.....

Date ...7/18/84... Signature of Operator or Agent

Luanne Corliss Title *as agent*

MHC/KOHE 7-18-84 Form C-1 4/84

THIS PERMIT
EXPIRES
JAN 1-8 1985

