

CARD MUST BE TYPED

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

CARD MUST BE SIGNED

Starting Date:5.....27.....85.....
month day year

API Number 15-

JAM
one
163-12,678-00-00

East

OPERATOR: License # ...8925.....

..NW SW NE... Sec .20 Twp .8 S, Rge .18. West
(location)

Name ..Liberty Operations and Completions, Inc.

Address ...308 West Mill.....

3630..... Ft North from Southeast Corner of Section

City/State/Zip ..Plainville, KS 67663.....

2310..... Ft West from Southeast Corner of Section

Contact Person ..David I. Comeau.....

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

Phone(913) 434-4686.....

Nearest lease or unit boundary line1650..... feet.

CONTRACTOR: License # ..5665.....

CountyRooks.....

Name ..Pioneer Drilling Company, Inc.....

Lease NameCarsten..... Well#1.....

City/State ..Plainville, Kansas.....

Domestic well within 330 feet : yes no

Well Drilled For: Well Class: Type Equipment:

- Oil Swd Infill 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:

Operator

Well Name

Comp Date Old Total Depth

Projected Total Depth3550..... feet

Projected Formation at TD.....Arbuckle.....

Expected Producing FormationsArbuckle.....

Depth to Bottom of fresh water100..... feet

Lowest usable water formationDakota.....

Depth to Bottom of usable water800..... feet

Surface pipe by Alternate : 1 2

Surface pipe to be set230..... feet

Conductor pipe if any requiredN/A..... feet

Ground surface elevation *Est: 2025 with* feet MSL

This Authorization Expires10-23-85.....

Approved By4-23-85 *PC*.....

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

Date *4-19-85* Signature of Operator or Agent

D. Plon Title *Vice Pres*.....

Form C-1 4/84

MHC/UDHE 4-23-85

