

CARD MUST BE TYPED

State of Kansas

CARD MUST BE SIGNED

### NOTICE OF INTENTION TO DRILL

(see rules on reverse side)

CORRECTION *X*

Expected Spud Date..... 11/12/87  
month day year

API Number 15— *059-24286-00-00* *X*

OPERATOR: License #..... 9873

*X* S2 SE NE Sec. 19 Twp. 16 S, Rg. 20 — East

Name..... PAINTER OIL COMPANY

..... \* 2970 — West

Address..... P.O. BOX 141B, RT. 2

..... Ft. from South Line of Section

City/State/Zip..... WELLSVILLE 66092

..... *660* Ft. from East Line of Section

Contact Person..... JOE SMITH

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

Phone..... (913) 242-7310

*X* Nearest lease or unit boundary line..... 330 feet

CONTRACTOR: License #..... 3417

County..... FRANKLIN

Name..... SIMPSON DRILLING

Lease Name..... JOHN MUSACK Well #..... 3

City/State..... OSAWATOMIE, KS 66064

Ground surface elevation..... feet MSL

Well Drilled For: Well Class: Type Equipment:

Domestic well within 330 feet: —yes XX no

XX Oil — Storage XX Infield XX Mud Rotary

Municipal well within one mile: —yes XX no

— Gas — Inj. — Pool Ext. — Air Rotary

Depth to bottom of fresh water.....

— OWWO — Expl — Wildcat — Cable

Depth to bottom of usable water *200*

If OWWO: old well info as follows:

Surface pipe by Alternate: 1 — 2 XX

Operator.....

Surface pipe planned to be set..... 20

Well Name.....

Conductor pipe required.....

Comp Date..... Old Total Depth.....

Projected Total Depth..... 900 feet

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

Date ..11/11/87... Signature of Operator or Agent *Greg Engleman* Title. AS AGENT

For KCC Use:

Conductor Pipe Required..... feet; Minimum Surface Pipe Required..... *20* feet per Alt. *X* 2

This Authorization Expires..... *4-30-88* Approved By..... *RCH 11-12-87*

*X* WAS: S $\frac{1}{2}$ -S $\frac{1}{2}$ -SENE 2805 FSL Nearest *ORIG. RCV'D 10-30-87*  
Lease Line *660*

