

For KCC Use: 5-15-06
 Effective Date: _____
 District # 1
 SGA? Yes No

KANSAS CORPORATION COMMISSION
 OIL & GAS CONSERVATION DIVISION

RECEIVED

OWWO

MAY 05 2006

Form C-1
 December 2002

NOTICE OF INTENT TO DRILL

KCC WICHITA

Form must be Typed
 Form must be Signed
 All blanks must be Filled

Must be approved by KCC five (5) days prior to commencing well

Expected Spud Date MAY 16, 2006
 month day year

Spot East
 160' W NE NE Sec. 9 Twp. 34 S. R. 13 West
 660' FNL _____ feet from N / S Line of Section
 820' FEL _____ feet from E / W Line of Section

OPERATOR: License# 33168
 Name: WOOLSEY OPERATING COMPANY, LLC
 Address: 125 N. Market, Suite 1000
 City/State/Zip: Wichita, Kansas 67202
 Contact Person: Dean Pattison
 Phone: 316-267-4379 ext 107

Is SECTION Regular Irregular?

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

CONTRACTOR: License# 5929
 Name: Duke Drilling Co., Inc.

County: Barber
 Lease Name: DONOVAN 'B' Well #: 1 'OWWO'
 Field Name: Aetna

Is this a Prorated / Spaced Field? Yes No

Target Formation(s): Mississippian

Nearest Lease or unit boundary: 660'

Ground Surface Elevation: 1824' feet MSL

Water well within one-quarter mile: Yes No

Public water supply well within one mile: Yes No

Depth to bottom of fresh water: 150'

Depth to bottom of usable water: 180'

Surface Pipe by Alternate: 1 2

Length of Surface Pipe ~~Planned to be set:~~ has existing set at 400'

Length of Conductor Pipe required: n/a

Projected Total Depth: 5450'

Formation at Total Depth: Simpson sand

Water Source for Drilling Operations:
 Well Farm Pond Other To be hauled

DWR Permit #: _____

(Note: Apply for Permit with DWR)

Will Cores be taken? Yes No

If Yes, proposed zone: _____

Well Drilled For:	Well Class:	Type Equipment:
<input checked="" type="checkbox"/> Oil	<input type="checkbox"/> Enh Rec	<input checked="" type="checkbox"/> Infield
<input checked="" type="checkbox"/> Gas	<input type="checkbox"/> Storage	<input type="checkbox"/> Pool Ext.
<input checked="" type="checkbox"/> OWWO	<input type="checkbox"/> Disposal	<input type="checkbox"/> Wildcat
<input type="checkbox"/> Seismic; _____ # of Holes	<input type="checkbox"/> Other	<input checked="" type="checkbox"/> Mud Rotary
<input type="checkbox"/> Other		<input type="checkbox"/> Air Rotary
		<input type="checkbox"/> Cable

If OWWO: old well information as follows:
 Operator: American Energies
 Well Name: Donovan G-1
 Original Completion Date: 06-10-90 Original Total Depth: 5060'

Directional, Deviated or Horizontal wellbore? Yes No

If Yes, true vertical depth: _____

Bottom Hole Location: _____

KCC DKT #: _____

AFFIDAVIT

The undersigned hereby affirms that the drilling, completion and eventual plugging of this well will comply with K.S.A. 55 et. seq.

It is agreed that the following minimum requirements will be met:

1. Notify the appropriate district office **prior** to spudding of well;
2. A copy of the approved notice of intent to drill **shall be** posted on each drilling rig;
3. The minimum amount of surface pipe as specified below **shall be set** by circulating cement to the top; in all cases surface pipe **shall be set** through all unconsolidated materials plus a minimum of 20 feet into the underlying formation.
4. If the well is dry hole, an agreement between the operator and the district office on plug length and placement is necessary **prior to plugging**;
5. The appropriate district office will be notified before well is either plugged or production casing is cemented in;
6. If an ALTERNATE II COMPLETION, production pipe shall be cemented from below any usable water to surface within **120 days** of spud date.
 Or pursuant to Appendix "B" - Eastern Kansas surface casing order #133,891-C, which applies to the KCC District 3 area, alternate II cementing must be completed within 30 days of the spud date or the well shall be plugged. **In all cases, NOTIFY district office** prior to any cementing.

I hereby certify that the statements made herein are true and to the best of my knowledge and belief.

Date: 5-4-2006 Signature of Operator or Agent: Dean Pattison Title: Operations Manager

For KCC Use ONLY
 API # 15 - 007-22312-00-01
 Conductor pipe required None feet
 Minimum surface pipe required 400 feet per Alt. (1) X
 Approved by: Rct 5-10-06
 This authorization expires: 11-10-06
 (This authorization void if drilling not started within 6 months of approval date.)
 Spud date: _____ Agent: _____

- Remember to:
- File Drill Pit Application (form CDP-1) with Intent to Drill;
 - File Completion Form ACO-1 within 120 days of spud date;
 - File acreage attribution plat according to field proration orders;
 - Notify appropriate district office 48 hours prior to workover or re-entry;
 - Submit plugging report (CP-4) after plugging is completed;
 - Obtain written approval before disposing or injecting salt water.
- If this permit has expired (See: authorized expiration date) please check the box below and return to the address below.
- Well Not Drilled - Permit Expired
 Signature of Operator or Agent: _____
 Date: _____
- 9
34
13W

Mail to: KCC - Conservation Division, 130 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.

API No. 15 - 007-22312-00-01
 Operator: WOOLSEY OPERATING COMPANY, LLC
 Lease: DONOVAN 'B'
 Well Number: 1 'OWWO'
 Field: Aetna

Number of Acres attributable to well: _____
 QTR / QTR / QTR of acreage: 160' W - NE - NE

Location of Well: County: Barber
660' FNL feet from N / S Line of Section
820' FEL feet from E / W Line of Section
 Sec. 9 Twp. 34 S. R. 13 East West

Is Section: Regular or Irregular

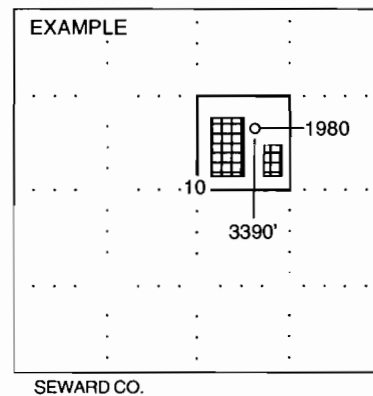
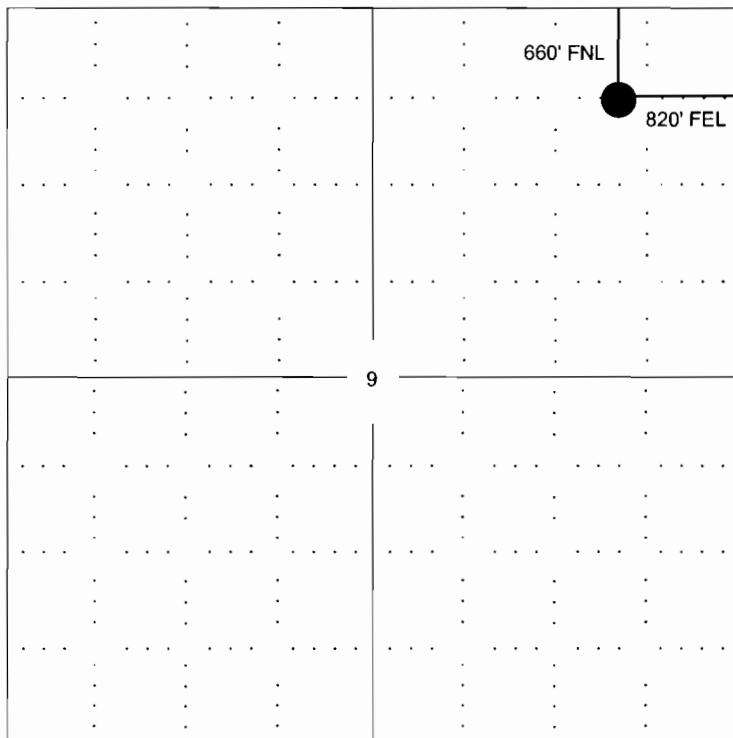
If Section is Irregular, locate well from nearest corner boundary.

Section corner used: NE NW SE SW

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.)



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

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

1. 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: (CO-7 for oil wells; CG-8 for gas wells).

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
APPLICATION FOR SURFACE PIT

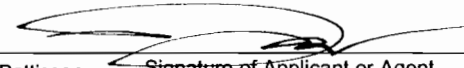
RECEIVED

MAY 05 2006

Form CDP-1
April 2004
Form must be Typed

KCC WICHITA

Submit in Duplicate

Operator Name: Woolsey Operating Company, LLC		License Number: 33168
Operator Address: 125 N. Market, Suite 1000, Wichita, Kansas 67202		
Contact Person: Carl W. Durr		Phone Number: (620) 886 - 5606 ext 27
Lease Name & Well No.: DONOVAN B-1 OWWO		Pit Location (QQQQ): 160' W of <u> C </u> <u> NE </u> <u> NE </u> Sec. <u> 9 </u> Twp. <u> 34 </u> R. <u> 13 </u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u> 660 </u> Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section <u> 820 </u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <u> Barber </u> County
Type of Pit: <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Burn Pit <input type="checkbox"/> Settling Pit <input checked="" type="checkbox"/> Drilling Pit <input type="checkbox"/> Workover Pit <input type="checkbox"/> Haul-Off Pit <i>(If WP Supply API No. or Year Drilled)</i>	Pit is: <input checked="" type="checkbox"/> Proposed <input type="checkbox"/> Existing If Existing, date constructed: _____ Pit capacity: _____ (bbls)	
Is the pit located in a Sensitive Ground Water Area? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Chloride concentration: _____ mg/l <i>(For Emergency Pits and Settling Pits only)</i>
Is the bottom below ground level? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Artificial Liner? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	How is the pit lined if a plastic liner is not used? Clays from mud will provide sealer.
Pit dimensions (all but working pits): <u> 80 </u> Length (feet) <u> 80 </u> Width (feet) <u> N/A </u> Steel Pits Depth from ground level to deepest point: <u> 4 </u> (feet)		
If the pit is lined give a brief description of the liner material, thickness and installation procedure.		Describe procedures for periodic maintenance and determining liner integrity, including any special monitoring. Monitor pits until thoroughly dry.
Distance to nearest water well within one-mile of pit <u> N/A </u> feet Depth of water well _____ feet		Depth to shallowest fresh water _____ feet. Source of information: _____ measured _____ well owner _____ electric log _____ KDWR
Emergency, Settling and Burn Pits ONLY: Producing Formation: _____ Number of producing wells on lease: _____ Barrels of fluid produced daily: _____ Does the slope from the tank battery allow all spilled fluids to flow into the pit? <input type="checkbox"/> Yes <input type="checkbox"/> No		Drilling, Workover and Haul-Off Pits ONLY: Type of material utilized in drilling/workover: <u> Fresh </u> Number of working pits to be utilized: <u> 3 </u> Abandonment procedure: <u> When dry, backfill and restore location. </u> Drill pits must be closed within 365 days of spud date.
I hereby certify that the above statements are true and correct to the best of my knowledge and belief.		
<u> May 4, 2006 </u> Date		 _____ Dean Pattison Signature of Applicant or Agent

KCC OFFICE USE ONLY

RF64C

Date Received: **5/5/06** Permit Number: _____ Permit Date: **5/9/06** Lease Inspection: Yes No

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

15-007-2200-01

KANSAS

CORPORATION COMMISSION

KATHLEEN SEBELIUS, GOVERNOR
BRIAN J. MOLINE, CHAIR
ROBERT E. KREHBIEL, COMMISSIONER
MICHAEL C. MOFFET, COMMISSIONER

May 8, 2006

Mr. Dean Pattisson
Woolsey Operating Company, LLC
125 N. Market Ste 1000
Wichita, KS 67202

RE: Drilling Pit Application
Donovan B Lease Well No. 1 OWWO
NE/4 Sec. 09-34S-13W
Barber County, Kansas

Dear Mr. Pattisson:

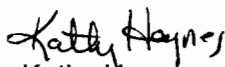
District staff has inspected the above referenced location and has determined that the reserve pit shall be constructed **without slots**, the bottom shall be flat and reasonably level, and the free fluids must be removed. The fluids are to be removed from the reserve pit as soon as practical after drilling operations have ceased.

If production casing is set all completion fluids shall be removed from the working pits daily. NO completion fluids or non-exempt wastes shall be placed in the reserve pit.

The fluids should be taken to an authorized disposal well. Please call the District Office at (620) 225-8888 when the fluids have been removed. Please file form CDP-5 (August 2004), Exploration and Production Waste Transfer, within 30 days of fluid removal. Conservation division forms are available through our office and on the KCC web site:
www.kcc.state.ks.us/conservation/forms.

A copy of this letter should be posted in the doghouse along with the approved Intent to Drill. If you have any questions or concerns please feel free to contact the undersigned at the above address.

Sincerely,


Kathy Haynes

Environmental Protection and Remediation Department

cc: File

KANSAS
 CORPORATION COMMISSION
 Colorado Derby Building
 Topeka, Kansas 67202

WELL PLUGGING RECORD
 K.A.R.-82-3-117

API NUMBER 15-007-22,312

LEASE NAME Donovan

TYPE OR PRINT
 NOTICE: Fill out completely
 and return to Cons. Div.
 office within 30 days.

WELL NUMBER 'G' 1

4620 Ft. from S Section Line

820 Ft. from E Section Line

SEC. 9 TWP. 34 RGE. 13 (E) (W)

COUNTY Barber

Date Well Completed 6/10/90

Plugging Commenced 6/10/90

Plugging Completed 6/10/90

LEASE OPERATOR American Energies Corporation

ADDRESS 155 N. Market, Suite 710 Wichita, KS 67202

PHONE#(316) 263-5785 OPERATORS LICENSE NO. 5399

Character of Well D&A

(Oil, Gas, D&A, SWD, Input, Water Supply Well)

The plugging proposal was approved on _____ (date)

by _____ (KCC District Agent's Name).

Is ACO-1 filed? Yes If not, Is well log attached? _____

Producing Formation _____ Depth to Top _____ Bottom _____ T.D. _____

Show depth and thickness of all water, oil and gas formations.

OIL, GAS OR WATER RECORDS | CASING RECORD

Formation	Content	From	To	Size	Put In	Pulled out
	Surface	0	400'	8-5/8"	400'	none

STATE OF KANSAS
 JUL 10 1990
 CONSERVATION DIVISION
 WICHITA, KANSAS

Describe in detail the manner in which the well was plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. If cement or other plugs were used, state the character of same and depth placed, from _____ feet to _____ feet each set.

Plugged well with 125 sx of 60/40 Poz, 6% gel as follows:

847' with 50 sx; 412' with 50 sx; 40' with 10 sx; rathole with 15 sx
added 50 sx common 3%cc to top plug.

(If additional description is necessary, use BACK of this form.)

Name of Plugging Contractor ALLEN DRILLING COMPANY License No. 5418

Address P.O. Box 1389 Great Bend, KS 67530

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: American Energies Corporation

STATE OF Kansas COUNTY OF Sedgewick, ss.

Alan S. DeGood (Employee of Operator) or (Operator) of above-described well, being first duly sworn on oath, says: That I have knowledge of the facts, statements, and matters herein contained and the log of the above-described well as filed that the same are true and correct, so help me God.

(Signature) Alan S. DeGood

(Address) same as above

SUBSCRIBED AND SWORN TO before me this 9th day of July, 19 90

Melinda S. Wooten
 Notary Public

My Commission Expires: 3-12-92

