Effective Date: 5-/5-06 District # 2 For KCC Use: SGA? Yes No

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form must be Typed Form must be Signed

NOTICE OF INTENT TO DRILL

Form C-1 December 2002 All blanks must be Filled

		wusi be ap	oproved by NCC rive	(5) days prior to commencing well
Expected Spud Date	5	20	2006	Spot X East
Expected opud Date	month	day	year	NW - SE - NW Sec. 29 Twp. 34 S. R. 2 West
	30253 V			3630 feet from N / X S Line of Section
OPERATOR: License#	Petroleum,	Inc.		3630 feet from X E / W Line of Section
Name: Cyclone I		1110.		Is SECTION _X RegularIrregular?
City/State/Zip: Jenks		7		(Note: Locate well on the Section Plat on reverse side)
Contact Person: Jame	es Haver			County: Sumner
Phone: (918) 291	1-3200	,		Lease Name: WolfWell #: 11
1 110110.				Field Name: Aston SE
CONTRACTOR: License#				Is this a Prorated / Spaced Field?
Name: Gulick Dri	illing Co.	, Inc.		Target Formation(s): Cleveland
Well Drilled For:	Well Class:	Tirne	Equipment:	Nearest Lease or unit boundary: 330'
_ /_				Ground Surface Elevation: Ext 1200 feet MSL
X Oil Enh R	<u> </u>		Mud Rotary	Water well within one-quarter mile:
Gas Storag	, H	==	Air Rotary	Public water supply well within one mile:
Seismic:# of		,,	Cable	Depth to bottom of fresh water: 150
Other	Holes Other			Depth to bottom of usable water: 230
Other				Surface Pipe by Alternate: X 1 2
If OWWO: old well information	ation as follows:			Length of Surface Pipe Planned to be set: 250
Operator:				Length of Conductor Pipe required: None
Well Name:				Projected Total Depth: 3250
Original Completion Da	ate:	Original Tota	al Depth:	Formation at Total Depth: Cleveland
Directional Deviated or He	rizantal wallbara?	,	Yes X No	Water Source for Drilling Operations:
Directional, Deviated or Ho				Well X Farm Pond Other
If Yes, true vertical depth:				DWR Permit #:
Bottom Hole Location:				(Note: Apply for Permit with DWR)
KCC DKT #:				Will Cores be taken?
				If Yes, proposed zone:
			AFFI	DAVIT
The undersigned hereby a	affirms that the dr	illing, compl	letion and eventual pl	ugging of this well will comply with K.S.A. 55 et. seq.
It is agreed that the follow	ring minimum req	uirements w	vill be met:	
1. Notify the appropria	ite district office	<i>orior</i> to spu	dding of well;	
A copy of the appro				
				It by circulating cement to the top; in all cases surface pipe shall be set
				ne underlying formation. istrict office on plug length and placement is necessary prior to plugging;
				ged or production casing is cemented in;
				ed from below any usable water to surface within <i>120 days</i> of spud date.
Or pursuant to App	endix "B" - Easte	rn Kansas	surface casing order	#133,891-C, which applies to the KCC District 3 area, alternate II cementing
				be plugged. In all cases, NOTIFY district office prior to any cementing.
I hereby certify that the st	tatements made I	nerein are tr	rue and to the best of	f my knowledge and belief.
Date: 5.9.0L	•		\	Title President
Date: 0 1.06	Signature of	Operator or	Agent:	Title: President
				Remember to:
For KCC Use ONLY	001170	~~~	·	- File Drill Pit Application (form CDP-1) with Intent to Drill;
API # 15 - 191-	22470-			- File Completion Form ACO-1 within 120 days of spud date; - File acreage attribution plat according to field proration orders;
Conductor pipe required None feet				- File acreage attribution plat according to field proration orders;
	20	<u></u>	(21/	Notify appropriate district office 48 hours prior to workover or re-entry;
Minimum surface pipe re			eet per Alt. (1)	 Submit plugging report (CP-4) after plugging is completed; Obtain written approval before disposing or injecting salt water.
Approved by: P(#	11-10-			
This authorization expires	·			 If this permit has expired (See: authorized expiration date) please check the box below and return to the address below.
(This authorization void if	drilling not started w	ithin 6 month	s of approval date.)	Well Not Drilled - Permit Expired
Spud date:	Agent.			<u> </u>
Space date	Agent			Signature of Operator or Agent:
				<u></u>

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.

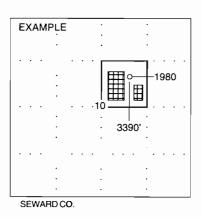
API No. 15 - 191-22470-0000	Location of Well: County: Sumner
Operator: Cyclone Petroleum, Inc.	feet from N / X S Line of Section
Lease: Wolf	feet from x E / W Line of Section
Well Number:	Sec. 29 Twp. 34 S. R. 2 X East Wes
Field: Aston SE	
Number of Acres attributable to well:	Is Section: X Regular or Irregular
QTR / QTR of acreage:	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.)

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		3630
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3630		



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

Sumner County

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: (C0-7 for oil wells; CG-8 for gas wells).

Kansas Corporation Commission Oil & Gas Conservation Division

Form CDP-1 April 2004 Form must be Typed

APPLICATION FOR SURFACE PIT

Submit in Duplicate

		Dillit III Duplicat					
Operator Name: Cyclone Petrole	um, Inc.		License Number: 30253				
Operator Address: 1030 W. Main, Jenks, OK 74037							
Contact Person: James Haver	•	Phone Number: (918) 291 - 3200					
Lease Name & Well No.: Wolf #11		Pit Location (QQQQ):					
Type of Pit:	Pit is:		<u>NW - SE - NW - </u>				
Emergency Pit Burn Pit	X Proposed	Existing	Sec. 29 Twp. 34 R. 2 X East West				
Settling Pit X Drilling Pit	If Existing, date of	onstructed:					
Workover Pit . Haul-Off Pit	Pit capacity:						
(If WP Supply API No. or Year Drilled)	(bbls		SumnerCounty				
Is the pit located in a Sensitive Ground Water	Area? Yes	No	Chloride concentration: mg/l				
In the hettern heless ground level?	Additional Linear		(For Emergency Pits and Settling Pits only)				
Is the bottom below ground level? X Yes No	Artificial Liner? Yes x	No	How is the pit lined if a plastic liner is not used?				
A 163 Ho	les X	140	Coated with Benonite.				
Pit dimensions (all but working pits):60	Length (fe	eet) 40	Width (feet) N/A: Steel Pits				
Depth fr	om ground level to de	eepest point:	4 (feet)				
material, thickness and installation procedure. liner integrity, including any special monitoring.							
Distance to nearest water well within one-mile N/A feet Depth of water well		Depth to shallowest fresh waterfeet. Source of information: feet. measured well owner electric log KDWR					
Emergency, Settling and Burn Pits ONLY:	_		over and Haul-Off Pits ONLY:				
Producing Formation:		Type of materia	al utilized in drilling/workover: <u>Chemical Mud</u>				
Number of producing wells on lease:		Number of working pits to be utilized: 4					
Barrels of fluid produced daily:		Abandonment	procedure: <u>Let dry and backfill.</u>				
Does the slope from the tank battery allow all flow into the pit? Yes No	spilled fluids to	Drill pits must be closed within 365 days of spud date.					
hereby certify that the above state	I hereby certify that the above statements are true and correct to the best of my knowledge and belief.						
Date James Haver Signature of Applicant or Agent							
KCC OFFICE USE ONLY							
Date Received: 5/10/06 Permit Number: Permit Date: 5/10/06 Lease Inspection: Yes X No							