

For KCC Use:
 Effective Date: 6-4-06
 District #: 3
 SGA? Yes No

KANSAS CORPORATION COMMISSION
 OIL & GAS CONSERVATION DIVISION

RECEIVED

JUN 26 2006

Form C-1

December 2002

Form must be Typed

Form must be Signed

Blanks must be Filled

NOTICE OF INTENT TO DRILL

KCC WICHITA

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

Expected Spud Date 5 31 2006
 month day year

OPERATOR: License# 5150 ✓
 Name: COLT ENERGY, INC.
 Address: P O BOX 388
 City/State/Zip: IOLA, KS 66749
 Contact Person: DENNIS KERSHNER
 Phone: 620-365-3111

CONTRACTOR: License# 33072 ✓
 Name: WELL REFINED DRILLING COMPANY, INC

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

If OWWO: old well information as follows:
 Operator: _____
 Well Name: _____
 Original Completion Date: _____ Original Total Depth: _____

Directional, Deviated or Horizontal wellbore? Yes No

If Yes, true vertical depth: _____

Bottom Hole Location: _____

KCC DKT #: _____

Spot East
 NE - NE - SW Sec. 19 Twp. 31 S. R. 18 West
2210 feet from N / S Line of Section
2260 feet from E / W Line of Section

Is SECTION _____ Regular Irregular?
 (Note: Locate well on the Section Plat on reverse side)

County: LABETTE
 Lease Name: MARCH Well #: 11-19
 Field Name: COFFEYVILLE - CHERRYVALE

Is this a Prorated / Spaced Field? Yes No

Target Formation(s): PENNSYLVANIAN COALS ✓

Nearest Lease or unit boundary: 200 380'

Ground Surface Elevation: UNKNOWN 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: 100

Depth to bottom of usable water: 175

Surface Pipe by Alternate: 1 2

Length of Surface Pipe Planned to be set: 20' ✓

Length of Conductor Pipe required: NONE ✓

Projected Total Depth: 1100 ✓

Formation at Total Depth: MISSISSIPPI

Water Source for Drilling Operations:

Well Farm Pond Other X ✓

DWR Permit #: _____

(Note: Apply for Permit with DWR)

Will Cores be taken? Yes No

If Yes, proposed zone: _____

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: 5-23-06 Signature of Shirley Statler Agent: _____ Title: PRODUCTION CLERK

For KCC Use ONLY

API # 15 - 099-23981-0000

Conductor pipe required None feet

Minimum surface pipe required 20 feet per Alt. **X(2)**

Approved by: RH 5-30-06

This authorization expires: 11-30-06
 (This authorization void if drilling not started within 6 months of effective 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: _____

19 31 18E

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 - 099-23981-0000
Operator: COLT ENERGY, INC.
Lease: MARCH
Well Number: 11-19
Field: COFFEYVILLE - CHERRYVALE
Number of Acres attributable to well: _____
QTR / QTR / QTR of acreage: NE - NE - SW

Location of Well: County: LABETTE
2210 feet from N / S Line of Section
2260 feet from E / W Line of Section
Sec. 19 Twp. 31 S. R. 18 East West

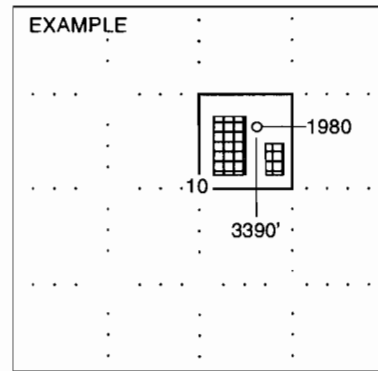
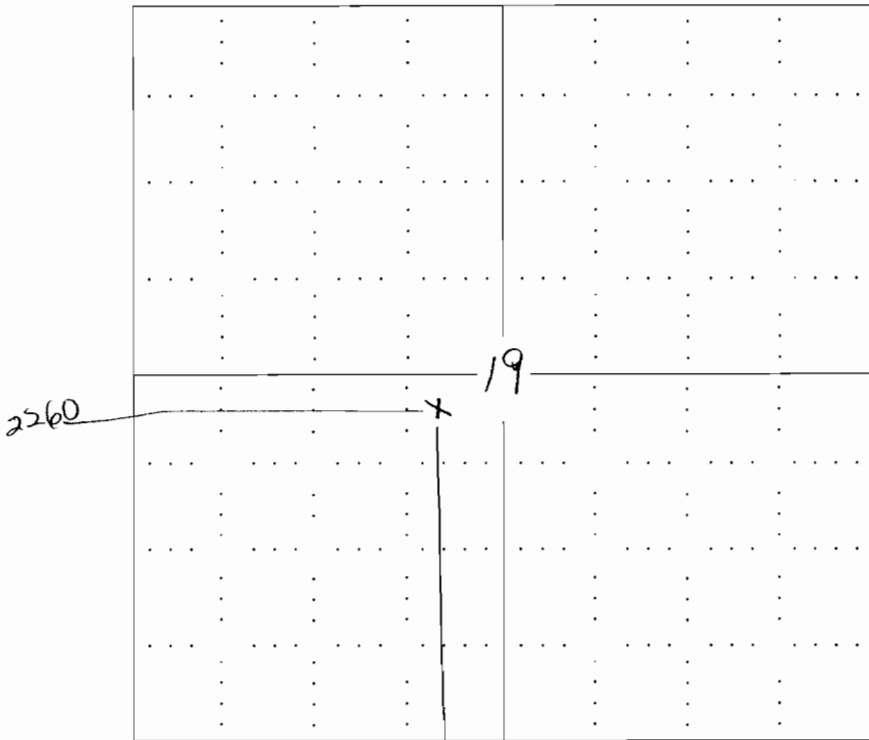
Is Section: Regular or Irregular

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.)



SEWARD CO.

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

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

RECEIVED
MAY 26 2006
KCC WICHITA

Form CDP-1
April 2004
Form must be Typed

Submit in Duplicate

| | | |
|---|---|---|
| Operator Name: COLT ENERGY, INC | | License Number: 5150 |
| Operator Address: P O BOX 388, IOLA, KS 66749 | | |
| Contact Person: DENNIS KERSHNER | | Phone Number: (620) 365 - 3111 |
| Lease Name & Well No.: MARCH 11-19 | | Pit Location (QQQQ): NE NE SW Sec. 19 Twp. 31 R. 18 <input checked="" type="checkbox"/> East <input type="checkbox"/> West 2210 Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section 2260 Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section LABETTE 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? NATIVE CLAY SOIL |
| Pit dimensions (all but working pits): 30 Length (feet) 15 Width (feet) N/A: Steel Pits Depth from ground level to deepest point: 5 (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. |
| Distance to nearest water well within one-mile of pit NONE KNOWN feet Depth of water well _____ feet | | Depth to shallowest fresh water UNKNOWN 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: NATIVE SOIL Number of working pits to be utilized: 1 Abandonment procedure: DRILL W/AIR RIG NO FLUID- PUSH IN 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. | | |
| Date: 5-23-06 | | Signature of Shirley Stotler _____ Inspector Agent |

15-099-023981-0000

| | | | |
|-------------------------------|----------------------|-----------------------------|---|
| KCC OFFICE USE ONLY | | | |
| Date Received: 5/26/06 | Permit Number: _____ | Permit Date: 5/26/06 | Lease Inspection: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

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