

CARD MUST BE TYPED

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

CARD MUST BE SIGNED

Starting Date: 8/13/85  
month day year

API Number 15- 059-23,980-00-00

OPERATOR: License # 6142  
Name Town Oil Company  
Address Route 4  
City/State/Zip Paola, KS 66071  
Contact Person Lester Town  
Phone 913-294-2125

NW (location) Sec 19 Twp 16 S, Rge 21  East  West  
4445 Ft North from Southeast Corner of Section  
2805 Ft West from Southeast Corner of Section  
(Note: Locate well on Section Plat on reverse side)

CONTRACTOR: License # 6142  
Name COMPANY TOOLS  
City/State

Nearest lease or unit boundary line 330 feet.  
County Franklin  
Lease Name Brown Well# 12

Well Drilled For: Well Class: Type Equipment:  
 Oil  Swd  Infield  Mud Rotary  
 Gas  Inj  Pool Ext.  Air Rotary  
 OWWO  Expl  Wildcat  Cable

Domestic well within 330 feet:  yes  no  
Municipal well within one mile:  yes  no

If OWWO: old well info as follows:  
Operator  
Well Name  
Comp Date  
Projected Total Depth 700 feet  
Projected Formation at TD Bartlesville  
Expected Producing Formations Bartlesville

Depth to Bottom of fresh water 275' feet  
Lowest usable water formation  
Depth to Bottom of usable water 300 200 feet  
Surface pipe by Alternate: 1  2   
Surface pipe to be set 20 feet  
Conductor pipe if any required 0 feet  
Ground surface elevation feet MSL  
This Authorization Expires 1-8-86  
Approved By 7-8-85 RCH

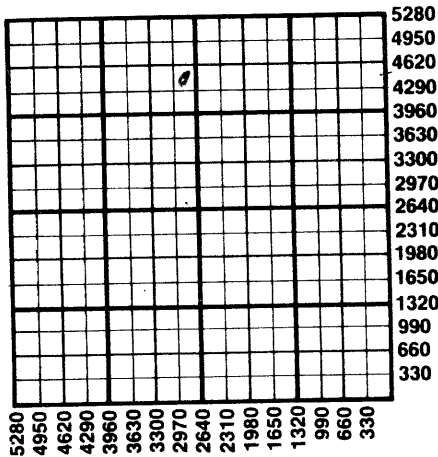
I certify that we will comply with K.S.A. 55-101, et seq., plus eventually plugging hole to K.C.C. specifications.

Date 7-2-85 Signature of Operator or Agent Lester Town Title Partner

RCH for KDHE

Must be filed with the K.C.C. five (5) days prior to commencing well  
 This card void if drilling not started within six (6) months of date received by K.C.C.

A Regular Section of Land  
 1 Mile = 5,280 Ft.



Important procedures to follow:

1. Notify District office before setting surface casing.
2. Set surface casing by circulating cement to the top.
3. File completion forms ACO-1 with K.C.C. within 90 days of well completion, following instructions on ACO-1, side B and including copies of wireline logs.
4. Notify District office 48 hours prior to old well workover or re-entry.
5. Prior to plugging, prepare a plugging plan, then obtain agreement from the appropriate district office for an approved plugging plan.
6. Submit plugging report (CP-4) to K.C.C. after plugging is completed.
7. Obtain an approved injection docket number before disposing of salt water.
8. Notify K.C.C. within 10 days when injection commences or terminates.
9. If an alternate 2 completion, cement in the production pipe from below any usable water to surface within 120 days of spud date.

State Corporation Commission of Kansas  
 Conservation Division  
 200 Colorado Derby Building  
 Wichita, Kansas 67202  
 (316) 263-3238

7-8-85  
 RECEIVED  
 STATE CORPORATION COMMISSION  
 EMMETT  
 CONSERVATION DIVISION  
 WICHITA, KANSAS