

TYPE

NOTICE OF INTENTION TO DRILL

C-1

TO BE FILED WITH THE STATE CORPORATION COMMISSION
PRIOR TO COMMENCEMENT OF WELL

API Number

(For office use only)

1. Operator Mid-States Petroleum Corp.

Address P.O.Box 402, Paola, Ks. 66071

2. Contractor Mid-States Petroleum Corp.

Address P.O.Box 402, Paola, Ks. 66071

3. Type of Equipment: Rotary X Cable Tool _____

4. Well to be Drilled for: Oil X Gas _____

Disposal_____ Input_____ Other_____

5. Depth of Deepest Fresh Water within 1 mile 20 ft.

6. Depth of Municipal Water Well within 3 miles None ft.

7. Depth to Protect all Fresh Water 200 ft.

8. Amount of Surface Casing to be set 30 ft.

9. Alternate No. 1 _____ No. 2 X

REMARKS:

OPERATOR STATES THAT HE WILL COMPLY WITH K. S. A. 55-128

Starting Date As soon as Intent is
returned.

County Miami

Sec 4 Twp 17 S Rge 23 ~~W~~^E

Spot Location NW NE SW SW
1500' from North line.

Nearest Lease Line 500' from East line.

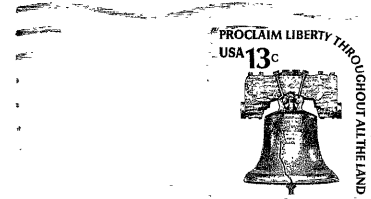
Lease Name Savage

Well No. 4

Est. Total Depth 350 ft.

Signature of Operator

John M. Posa *OK*



State Corporation Commission of Kansas
Conservation Division
245 North Water
Wichita, Kansas 67202

04-01-77
APR 6

(IF PREFERRED, MAIL IN ENVELOPE)