For KCC Use: Effective Date: District

Kansas Corporation Commission OIL & GAS CONSERVATION DIVISION

NOTICE OF INTENT TO DRILL

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

Form C-1 December 2002 Form must be Typed Form must be Signed All blanks must be Filled

Expected Spud Date		East.
	6. CE CU 17 1 17 10 50	East West
61/2	2805 feet from N / XXS Line of Section	
OPERATOR: License# 0142 Name: Town Oil Company, Inc.	1485feet from XX E / W Line of Section	n
16205 U 297+h C+	Is SECTION XX RegularIrregular?	
Address: 10203 w. 287th St. City/State/Zip: Paola, Kansas 66071		
Contact Person: Lester Town	(Note: Locate well on the Section Plat on reverse side) County: Franklin	
Phone: 913-294-2125	Lease Name: Killough Well #: 4	
/	Field Name: Paola-Rantoul	
CONTRACTOR: License# Company Tools	Is this a Prorated / Spaced Field?	No
Name:	Target Information(s): Squirre1	<u> </u>
Well Dellad Fee Well Class Fee Fee See	Nearest Lease or unit boundary: 165	
Well Drilled For: Well Class: Type Equipment:		MSL
X Oil Enh Rec X Infield Mud Rotary	Water well within one-quarter mile:	X No
Gas Storage Pool Ext. X Air Rotary	Public water supply well within one mile:	
OWWO Disposal Wildcat Cable	Depth to bottom of fresh water: 100	
Seismic; # of Holes Other	Depth to bottom of usable water: 200	
Other	Surface Pipe by Alternate: 1 XX 2	
If OWWO: old well information as follows:	Length of Surface Pipe Planned to be set: 20	
Operator:	Length of Conductor Pipe required: None	-
Well Name:	Projected Total Depth: 700	
Original Completion Date: Original Total Depth:	Formation at Total Depth: Squirrel	
	Water Source for Drilling Operations:	
Directional, Deviated or Horizontal wellbore?	Well Farm Pond Other X	
If Yes, true vertical depth:	DWR Permit #:	
Bottom Hole Location:	(Note: Apply for Permit with DWR)	
KCC DKT #:	Will Cores be taken?	No
	If Yes, proposed zone:	VEL
ΔFFI		VEL.
	DAVIT JUN 12	2006
The undersigned hereby affirms that the drilling, completion and eventual pl	DAVIT ugging of this well will comply with K.S.A. 55 et. seq.	_
The undersigned hereby affirms that the drilling, completion and eventual plat is agreed that the following minimum requirements will be met:	DAVIT JUN 12	_
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IN ALL CASES PLOT THE INTENDED WELL ON THE PLAT BELOW

Plat of acreage attributable to a well in a prorated or spaced field

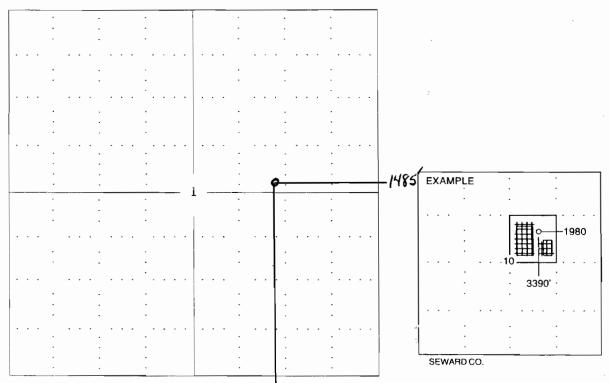
If the intended well is in a prorated or spaced field, please fully complete this side of the form. If the intended well is in a prorated or spaced field complete the plat below showing that the well will be properly located in relationship to other wells producing from the common source of supply. Please 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 - 059-25138-0000	Location of Well: County:
Operator:	feet from N / S Line of Section feet from E / W Line of Section
Lease:	feet from E / W Line of Section
Well Number:	Sec Twp S. R East West
Field:	
Number of Acres attributable to well:	Is Section: Regular or Irregular
QTR / 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 unil 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.
- 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

Operator Name: Town Oil Company, Inc.		License Number: 6142		
Operator Address: 16205 W. 287th St. Paola, Kansas				
Contact Person: Lester Town		Phone Number: (913) 294 - 2125		
Lease Name & Well No.: Killough #4		Pit Location (QQQQ):		
Type of Pit:	Pit is:		_ SE _ SE _ SW _ NE	
Emergency Pit Workover Pit	X Proposed Existing		Sec. 1 Twp. 17 R. 20 X East West	
Settling Pit X Drilling Pit	If Existing, date constructed:		2805 Feet from North / \overline{X} South Line of Section	
Burn Pit Haul-Off Pit (If WP Supply API No. or Year Drilled)	Pit capacity:			
	100	(bbls)	Franklin County	
Is the pit located in a Sensitive Ground Water	the pit located in a Sensitive Ground Water Area? Yes You		Chloride concentration: mg/l	
le the hottom helpy ground (512)	Artificial Linear	_	(For Emergency Pits and Settling Pits only)	
is the bottom below ground level? XX Yes No	Artificial Liner? Yes X	No	How is the pit lined if a plastic liner is not used?	
XX ies	les W		Pits not lined unless not holding fluid	
Pit dimensions (all but working pits):8 Length (feet) Width (feet) N/A: Steel Pits				
Depth fr	om ground level to de	epest point:	5(feet)	
1		edures for periodic maintenance and determining notuding any special monitoring. RECEIVED JUN 1 2 2006		
			KCC Miles	
Distance to nearest water well within one-mile of pit Depth to shall Source of info		owest fresh water		
2474			ured well owner electric log KDWR	
Emergency, Settling and Burn Pits ONLY:		Drilling, Work	Drilling, Workover and Haul-Off Pits ONLY:	
Producing Formation: Type of mate		Type of materi	al utilized in drilling/workover: <u>fresh water</u>	
Number of producing wells on lease: Number of wo		rking pits to be utilized: 2		
Barrels of fluid produced daily: Abandonment		procedure: Pits filled as soon a well		
Does the slope from the tank battery allow all spilled fluids to				
flow into the pit? Yes No Drill pits must be closed within 365 days of spud date.			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.				
6-8-06		Police	tu Town Signature of Applicant of Agent	
KCC OFFICE USE ONLY				
Date Received: 6 12 04 Permit Nur	Date Received: 4 12 04 Permit Number: Permit Date: 6/12/04 Lease Inspection: Yes No			