

For KCC Use:  
 Effective Date: 7-11-06  
 District # 1  
 SGA?  Yes  No

KANSAS CORPORATION COMMISSION  
 OIL & GAS CONSERVATION DIVISION  
**NOTICE OF INTENT TO DRILL**

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

Must be approved by the K.C.C. five (5) days prior to commencing well

Expected Spud Date 7 6 06  
 month day year

Spot 60' N & 90' E OF  East  
SE - SW - NE Sec. 19 Twp. 18 S. R. 26  West  
2250 feet from  N /  S Line of Section  
1560 feet from  E /  W Line of Section

OPERATOR: License # 3842  
 LARSON OPERATING COMPANY  
 A DIVISION OF LARSON ENGINEERING, INC.  
 Name: \_\_\_\_\_  
 Address: 562 WEST HIGHWAY 4  
 City/State/Zip: OLMITZ, KS 67564-8561  
 Contact Person: TOM LARSON  
 Phone: (620) 653-7368

Is SECTION X Regular \_\_\_\_\_ Irregular?  
 (Note: Locate well on the Section Plat on Reverse Side)

CONTRACTOR: License # 33350  
 Name: SOUTHWIND DRILLING, INC.

County: NESS  
 Lease Name: MCLEISH Well #: 3-19  
 Field Name: \_\_\_\_\_

Is this a Prorated / Spaced Field?  Yes  No  
 Target Formation(s): MISSISSIPPI

Nearest Lease or unit boundary: 390'  
 Ground Surface Elevation: ESTIMATED 2635 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: 180  
 Depth to bottom of usable water: 1150

Surface Pipe by Alternate:  1  2  
 Length of Surface Pipe Planned to be set: 250'

Length of Conductor pipe required: \_\_\_\_\_  
 Projected Total Depth: 4650'

Formation at Total Depth: MISSISSIPPI  
 Water Source for Drilling Operations:

Well  Farm Pond Other WATER HAULER  
 DWR Permit #: \_\_\_\_\_

(Note: Apply for Permit with DWR )  
 Will Cores Be Taken?  Yes  No

If yes, proposed zone: \_\_\_\_\_

Well Drilled For:  Oil  Gas  OWWO  Seismic; \_\_\_\_\_ # of Holes  Other  
 Enh Rec  Storage  Disposal  
 Well Class:  Infield  Pool Ext.  Wildcat  Other  
 Type Equipment:  Mud Rotary  Air Rotary  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#: \_\_\_\_\_

*Oil: Gas Lease Attached*

**AFFIDAVIT**

The undersigned hereby affirms that the drilling, completion and eventual plugging of this well will comply with K.S.A. 55-101, 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 a 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 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: 06/29/2006 Signature of Operator or Agent: Carol Fan Title: SECRETARY/TREASURER

**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: \_\_\_\_\_ **RECEIVED**  
**JUL 05 2006**

**For KCC use ONLY**  
 API # 15 - 135-24525-0000  
 Conductor pipe required None feet  
 Minimum surface pipe required 200 feet per Alt. **X(2)**  
 Approved by: RH 7600  
 This authorization expires: 1-6-07  
 (This authorization void if drilling not started within 6 months of effective date.)  
 Spud date: \_\_\_\_\_ Agent: \_\_\_\_\_

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

**KCC WICHITA**

19  
18  
26W

**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 - 135-24525-0000  
 LARSON OPERATING COMPANY  
 Operator: A DIVISION OF LARSON ENGINEERING, INC.  
 Lease: MCLEISH  
 Well Number: 3-19  
 Field: \_\_\_\_\_

Location of Well: County: NESS  
 \_\_\_\_\_  
 \_\_\_\_\_ 2250 \_\_\_\_\_ feet from  N /  S Line of Section  
 \_\_\_\_\_ 1560 \_\_\_\_\_ feet from  E /  W Line of Section  
 Sec. 19 Twp. 18 S. R. 26  East  West

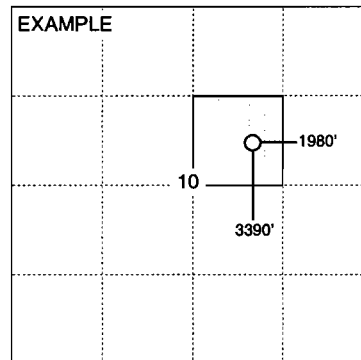
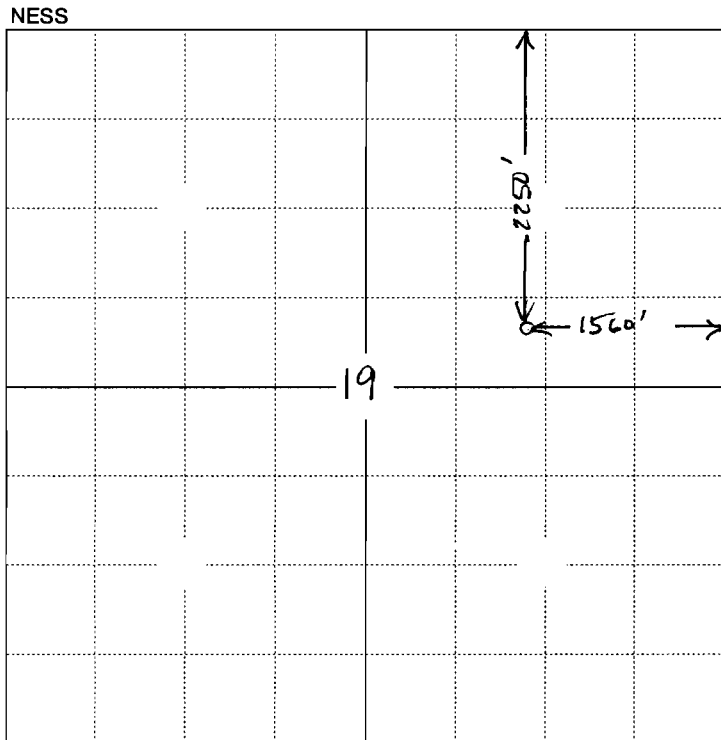
Is Section:  Regular or  Irregular

Number of Acres attributable to well: \_\_\_\_\_  
 QTR / QTR / QTR of acreage: \_\_\_\_\_ - \_\_\_\_\_ - N/2

**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 location.**

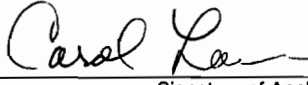
**In plotting the proposed location of the well, you must show:**

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

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

Form CDP-1  
April 2004  
Form must be Typed

*Submit in Duplicate*

Operator Name: LARSON OPERATING COMPANY A DIVISION OF LARSON ENGINEERING, INC.		License Number: 3842
Operator Address: 562 WEST HIGHWAY 4 OLMITZ, KS 67564-8561		
Contact Person: TOM LARSON		Phone Number: (620) 653-7368
Lease Name & Well No.: MCLEISH #3-19		Pit Location (QQQQ):  <u>    </u> - <u>36</u> - <u>SW</u> - <u>NE</u>  Sec. <u>19</u> Twp. <u>18S</u> R. <u>26</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>2250</u> Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section <u>1560</u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <u>NESS</u> County
Type of Pond: <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 <small>(If WP Supply API No. or Year Drilled)</small>	Pit is: <input checked="" type="checkbox"/> Proposed <input type="checkbox"/> Existing If Existing, date constructed:  Pit capacity: <u>6400</u> (bbls)	
Is the pit located in a Sensitive Ground Water Area? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Chloride Concentration: _____ mg/l <small>(For Emergency Pits and Settling Pits only)</small>
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 MUD & BENTONITE CLAY
Pit dimensions (all but working pits): <u>80</u> Length (feet) <u>80</u> Width (feet) <u>N/A: Steel Pits</u> Depth from ground level to deepest point: <u>4</u> (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 <u>1023</u> feet    Depth of water well <u>90</u> feet		Depth to shallowest fresh water <u>70</u> feet. Source of information: <u>JR-KBS</u> _____ measured _____ well owner _____ electric log _____ KDWR
<b>Emergency, Settling and Burn Pits ONLY:</b> 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		<b>Drilling, Workover and Haul-Off Pits ONLY:</b> Type of material utilized in drilling/workover: <u>FRESH WATER MUD</u> Number of working pits to be utilized: <u>3</u> Abandonment procedure: <u>ALLOW TO DRY THEN BACKFILL</u>  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.		
<u>6/29/06</u> Date	 Signature of Applicant or Agent	RECEIVED JUL 05 2006 KCC WICHITA
<b>KCC OFFICE USE ONLY</b>		
Date Received: <u>7/5/06</u>	Permit Number: _____	Permit Date: <u>7/5/06</u> Lease Inspection: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

15-135-24525-0000