TO BE FI	LED WITH	THE STATE CORPO	RATION COMMISSION
C Adm	PRIOR TO	COMMENCEMENT	OF WELL

1.	Operator Orville W. Hesting			
	Address Box 4 Yates Center, Kan. 66783			
2.	Contractor Allison Drilling			
	Address Box 95 Chanute, Kan. 66720			
3.	Type of Equipment: Rotary XX Cable Tool			
4.	Well to be Drilled for: Oil XX Gas			
	Disposal Other			
5.	Depth of Deepest Fresh Water within 1 mile None ft.			
6.	3. Depth of Municipal Water Well within 3 miles None ft.			
7.	Depth to Protect all Fresh Water 175 ft.			
	Amount of Surface Casing to be set65 ft			

9. Alternate No. 1______ No. 2____XX

API Number 15-207-21.4

REMARKS:

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

Est. Total Depth _____1050

Signature of Operator

MUNDEN ?



State Corporation Commission of Kansas Conservation Division P.O. Box 17027 Wichita, Kansas 67217

OCT 2 5 1978

10-25-28

(IF PREFERRED, MAIL IN ENVELOPE)