

CARD MUST BE TYPED

State of Kansas

CARD MUST BE SIGNED

NOTICE OF INTENTION TO DRILL

(see rules on reverse side)

Starting Date ^{Sept. 10} ~~AUGUST 25~~ 1985
month day year

API Number 15- 207-25,387-00-00
NE SE SW

OPERATOR: License # 6660
Name CMT PETRO RESOURCES, INC.

~~S. W. 4~~ Sec. 28 Twp. 23 S, Rg. 15 East
1000' Ft. from South Line of Section
2650' Ft. from East Line of Section

Address R.R. #2 BOX 149
City/State/Zip CANTON, MO 63435

(Note: Locate well on Section Plat on reverse side)

Contact Person: STEVE SLATER-R.R.#1 YATES CENTER,
Phone 1-316-625-2983 KS 66783

CONTRACTOR: License # 9430
Name CMT PETRO RESOURCES, INC.
City/State CANTON, MO 63435

Nearest lease or unit boundary line 1000' feet
County..... WOODSON
Lease Name. STOCKEBRAND#1 Well # 2
Ground surface elevation unknown feet MSL

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
Surface pipe by Alternate: _____ 1 2X
Depth to bottom of fresh water.. unknown 240
Depth to bottom of usable water unknown 150
Surface pipe planned to be set 40'
Projected Total Depth 1550' feet
Formation MISSISSIPPI

IF OWWO: old well info as follows:
Operator
Well Name
Comp Date Old Total Depth.....

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

Red for KCC

_____ cementing will be done immediately upon setting production casing.
Date 08/30/85 Signature of Operator or Agent X. Steve Slater Title SUPERVISOR

For KCC Use:
Conductor Pipe Required feet; Minimum Surface Pipe Required feet per Alt. 1 2
This Authorization Expires 3-5-86 Approved By 9-5-85

