

CARD MUST BE TYPED

State of Kansas

CARD MUST BE SIGNED

NOTICE OF INTENTION TO DRILL

(see rules on reverse side)

Starting Date 8 10 85
month day year

API Number 15- 207-25,361-00-00

OPERATOR: License # 6711
Name L. E. Robison Oil
Address Rt. 1
City/State/Zip Neosho Falls, Kansas 66758
Contact Person L. E. Robison
Phone 316-625-2076

NE 1/4 Sec. 29 Twp. 23 S, Rg. 16 East
..... 4510 West
..... 515 Ft. from South Line of Section
..... Ft. from East Line of Section

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

CONTRACTOR: License # 5661
Name Kelly Down Drilling Co., Inc.
City/State Neosho Falls, Kansas 66758

Nearest lease or unit boundary line 515 feet
County Woodson
Lease Name Robison Well # 13

Well Drilled For: Well Class: Type Equipment:
 Oil SWD Infield Mud Rotary
 Gas Inj Pool Ext. Air Rotary
 OWWO Expl Wildcat Cable

Ground surface elevation 1040 feet MSL
Domestic well within 330 feet: _____ yes no
Municipal well within one mile: _____ yes no
Surface pipe by Alternate: 1 _____ 2 3 _____
Depth to bottom of fresh water none
Depth to bottom of usable water 150
Surface pipe planned to be set 40
Projected Total Depth 1070 feet
Formation Squirrel

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.

_____ Alternate 3 cementing will be done immediately upon setting production casing.

Date 7-30-85 Signature of Operator or Agent *Legia Layman* Title *Agnt*

per for KCC

For KCC Use:

Conductor Pipe Required feet: Minimum Surface Pipe Required feet per Alt. 1 2 3

This Authorization Expires 2-5-86 Approved By 2-5-85 *[Signature]*

