

CARD MUST BE TYPED

State of Kansas
NOTICE OF INTENTION TO DRILL
 (see rules on reverse side)

CARD MUST BE SIGNED

Starting Date: ...8... month 5... day 1984... year 4.04

OPERATOR: License # ..5983.....
 Name ...Victor J. Leis.....
 Address ...P.O. Box 223.....
 City/State/Zip ...Yates Center, KS...66783...
 Contact Person ...Victor J. Leis.....
 Phone(316)...625-2106.....

CONTRACTOR: License #6010.....
 Name *Sally T. Davis* ~~Joe~~ Davis Drilling.....
 City/State ...Yates Center, KS...66783.....

Well Drilled For:	Well Class:	Type Equipment:
<input checked="" type="checkbox"/> Oil <input type="checkbox"/> Swd <input type="checkbox"/> Infield <input checked="" type="checkbox"/> Mud Rotary		
<input type="checkbox"/> Gas <input type="checkbox"/> Inj <input checked="" type="checkbox"/> Pool Ext. <input type="checkbox"/> Air Rotary		
<input type="checkbox"/> OWWO <input type="checkbox"/> Expl <input type="checkbox"/> Wildcat <input type="checkbox"/> Cable		

If OWWO: old well info as follows:

Operator
 Well Name
 Comp Date Old Total Depth
 Projected Total Depth1200..... feet
 Projected Formation at TD
 Expected Producing Formations

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

Date 8/3/84..... Signature of Operator or Agent

Wanne Corlies Title *As Agent*
WMC/KOHE 8/3/84

API Number 15-207-24,992-0000

☒ E...SE...NW... Sec 3... Twp 24... S, Rge 15 ☒ East
 (location) ☐ West

...330.0.... Ft North from Southeast Corner of Section

...330.0.... Ft West from Southeast Corner of Section

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

Nearest lease or unit boundary line ...6.60..... feet.

County ...Woodson.....

Lease Name ...Switzer..... Well# ...13....

Domestic well within 330 feet: ☐ yes ☒ noMunicipal well within one mile: ☐ yes ☒ no

Depth to Bottom of fresh water .15..... feet

Lowest usable water formation

Depth to Bottom of usable water 150..... feet

Surface pipe by Alternate: 1 ☐ 2 ☒ X

Surface pipe to be set ...40..... feet

Conductor pipe if any required

Ground surface elevation

This Authorization Expires 2-3-89

Approved By 8-3-84 *[Signature]*

RECEIVED
STATE

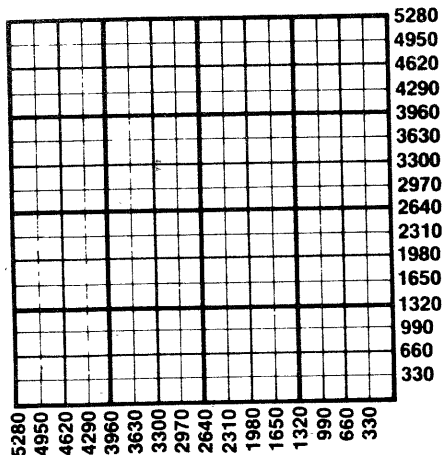
Must be filed with the K.C.C. five (5) days prior to commencing well
This card void if drilling not started within six (6) months of date received by K.C.C.

AUG 3 1984

8-3-84

CONSERVATION DIVISION

Wichita, Kansas
A Regular Section of Land
1 Mile = 5,280 Ft.



Important procedures to follow :

1. Notify District office before setting surface casing.
2. Set surface casing by circulating cement to the top.
3. File completion forms ACO-1 with K.C.C. within 90 days of well completion, following instructions on ACO-1, side 1, and including copies of wireline logs.
4. Notify District office 48 hours prior to old well workover or re-entry.
5. Prior to plugging, prepare a plugging plan, then obtain agreement from the appropriate district office for an approved plugging plan.
6. Submit plugging report (CP-4) to K.C.C. after plugging is completed.
7. Obtain an approved injection docket number before disposing of salt water.
8. Notify K.C.C. within 10 days when injection commences or terminates.
9. If an alternate 2 completion, cement in the production pipe from below any usable water to surface within 120 days of spud date.

State Corporation Commission of Kansas
Conservation Division
200 Colorado Derby Building
Wichita, Kansas 67202
(316) 263-3238