

CARD MUST BE TYPED

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

CARD MUST BE SIGNED

Starting Date:10.....12.....84.....
month day year 3:00

OPERATOR: License #6807.....
NameOil Drillers & Dev., Inc.....
Address7939 S.W. 29th St.....
City/State/ZipTopeka, Ks.....66614.....
Contact PersonDr. Jerry Fegan.....
Phone 913.354.9591 X3888 Irene.....

CONTRACTOR: License #
NameCompany Tools.....
City/State

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

If OWWO: old well info as follows:

OperatorOil Drillers & Dev., Inc.....
Well Name Beck-Mason Wood Farm #5.....
Comp Date 7-84..... Old Total Depth 1350.....
Projected Total Depth 1350..... 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 10-10-84..... Signature of Operator or Agent Raquel Robles..... Title

API Number 15- 207-24,827, 400-01
NW Sec 12 Twp 24 S, Rge 16
(location) ☒ East ☐ West

.....4620..... Ft North from Southeast Corner of Section
.....4620..... Ft West from Southeast Corner of Section
(Note: Locate well on Section Plat on reverse side)

Nearest lease or unit boundary line660..... feet.
CountyWoodson.....

Lease Name Beck-Mason Wood Farm Well# 5

Domestic well within 330 feet: ☐ yes ☒ no

Municipal well within one mile: ☐ yes ☒ no

Depth to Bottom of fresh water46..... feet

Lowest usable water formation

Depth to Bottom of usable water150..... feet

Surface pipe by Alternate: 1 ☐ 2 ☒

Surface pipe ~~be~~ set40..... feet

Conductor pipe if any required

Ground surface elevation feet MSL

This Authorization Expires 4-10-85

Approved By 10-10-84 [Signature]

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.

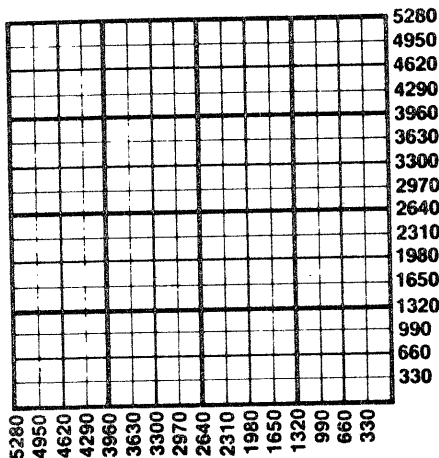
RECEIVED
STATE CORPORATION COMMISSION

OCT 10 1984
A Regular Section of Land
1 Mile - 5,280 Ft.
CONSERVATION DIVISION
Wichita, Kansas

10-10-84

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