

CARD MUST BE TYPED

State of Kansas

CARD MUST BE SIGNED

NOTICE OF INTENTION TO DRILL

(see rules on reverse side)

Starting Date ..... 6 ..... 15 ..... 86 .....  
month day year

API Number 15— 121-26, 757-00-00

OPERATOR: License # 5912 .....  
Name Howell Oil Co. ....  
Address Rt. 1 Box 370-B .....  
City/State/Zip Osawatome Ks. 66064 .....  
Contact Person Lon B Swearingen .....  
Phone 913-8290014 .....

NW<sup>1</sup>/<sub>4</sub> NW<sup>1</sup>/<sub>4</sub> SE<sup>1</sup>/<sub>4</sub> Sec. 1... Twp. 18... S, Rg... 21...  East  
2310 ..... Ft. from South Line of Section  
2080 ..... Ft. from East Line of Section

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

CONTRACTOR: License # 5912 .....  
Name Howell Oil Co. ....  
City/State Osawatome Ks. ....

Nearest lease or unit boundary line 330 ..... feet  
County Miami .....

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

Lease Name Howell (Gorges) ... Well # ~~WI~~ WI 2  
Ground surface elevation 902 ..... feet MSL

If OWWO: old well info as follows:

Operator .....  
Well Name .....  
Comp Date ..... Old Total Depth.....

Domestic well within 330 feet: \_\_\_yes  no  
Municipal well within one mile: \_\_\_yes  no  
Depth to bottom of fresh water. ~~x200x~~ None .....  
Depth to bottom of usable water 200 .....  
Surface pipe by Alternate: 1 \_\_\_ 2   
Surface pipe planned to be set 20 Feet .....  
Conductor pipe required .....  
Projected Total Depth 525 ..... feet  
Formation Squirrel .....

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

Date 5.26.86 Signature of Operator or Agent [Signature] Title Field Manager

For KCC Use:

Conductor Pipe Required ..... feet; Minimum Surface Pipe Required ..... feet per Alt. 4 (2)  
This Authorization Expires 12-2-86 Approved By [Signature] 6-2-86

RCH/1043

