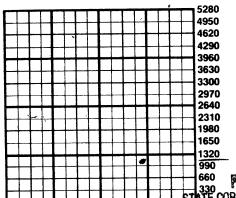
NOTICE OF State of Kansas NOTICE OF INTENTION TO DRILL (see rules on reverse side)

CARD MUST BE SIGNED

Starting 1	Date:Apr	11 10 ; 198	56	API Number 15- 207-25-467-00-0C
		month day	year year	XX East
OPERATOR: License # 5367 Name Double L. Drilling Address P.O. Box 284				NE SW SE Sec 16 Twp24 S, Rge 16 West
Yates Center. KS 66783				1/85 First of a Southeast Corner of Section
City/State/Zip John Leis Contact Person				
Contact Person				165
Phone3.166252485				Nearest lease or unit boundary line
CONTRACTOR: License #5367				County Woodson
NameDouble.L. Drilling				Lease Name Jones Well# 4
City/State Yates Center, K.S. 66.783				Domestic well within 330 feet : 🔲 yes 🙇 no
Well Dri	lled For:	Well Class:	Type Equipment:	Municipal well within one mile : 🔲 yes 🎽 no
XX Oil	☐ Swd	🛂 Infield	Mud Rotary	20
☐ Gas	🗌 Inj	☐ Pool Ext.	Air Rotary	Depth to Bottom of fresh water feet
OWW	O 🗌 Expl	☐ Wildcat	Cable	Lowest usable water formationSands.tone
If OWWO: old well info as follows:				Depth to Bottom of usable water
Operator				Surface pipe by Alternate: 1 \(\square\) 2 \(\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tilde{\tiilde{\tilde{\tilde{\tilde{\tilde{\tilde{\ti
Well Name				Surface pipe to be set40
Comp Date Old Total Depth				Conductor pipe if any required None feet
Projected Total Depth				Ground surface elevation unknown feet MSL
Projected Formation at TD				This Authorization Expires
Expected Producing Formations				Approved By 4-1-86
certify that we will comply with K.S.A. 55-101, et seq., plus eventually plugging he				, I B
certify that we will comply with K.S.A. 55-101, et seq., plus eventually plugging hole to K.C.C. specifications.				
Date APCIA 1,18% Signature of Operator or Agent Solme S. T. Title Partmen				
vate . AT f	.e. e ee e <i>g / .</i> e. ##	or operation	tor or Agent .	Form C-1 4/84

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.

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.

RECEIVED an alternate 2 completion, cement in the production pipe from below

330 STATE CORPORATION COMMISSION vater to surface within 120 days of spud date.

APR 1 1986

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