

CARD MUST BE TYPED

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

CARD MUST BE SIGNED

Starting Date:6.....20.....84.....
month day year 3 45

API Number 15- 207-24,902-0000

OPERATOR: License #7006.....
NameJ.R.K.Oil Company.....
Address202.S..State.....
City/State/Zip ..Iola, KS...66749.....
Contact Person Jack Kalotz.....
Phone316.365-3173.....

.....SE ... Sec .21. Twp .24. S, Rge 17. East
(location) West

.....810..... Ft North from Southeast Corner of Section
.....2475..... Ft West from Southeast Corner of Section
(Note: Locate well on Section Plat on reverse side)

CONTRACTOR: License #7721.....
NameCoconut Drilling Co.....
City/State ..Yates Center...66783.....

Nearest lease or unit boundary line165..... feet.
CountyWoodson.....
Lease NameRiley..... Well# ...5.....

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

Domestic well within 330 feet : yes no
Municipal well within one mile : yes no

If OWWO: old well info as follows:
Operator
Well Name
Comp Date Old Total Depth
Projected Total Depth1250..... feet
Projected Formation at TD
Expected Producing Formations

Depth to Bottom of fresh water20..... feet
Lowest usable water formation
Depth to Bottom of usable water150.200..... feet
Surface pipe by Alternate : 1 2
Surface pipe to be set50..... feet
Conductor pipe if any required feet
Ground surface elevation feet MSL
This Authorization Expires 12-18-84
Approved By 6-18-84 R

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

Date6/18/84 Signature of Operator or Agent Jeanne Hicks Title As Agent
MHC/KOHE 6-18-84

