

CARD MUST BE TYPED

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

CARD MUST BE SIGNED

Starting Date: .....4.....15.....85.....  
month day year 4:00

API Number 15- 207-25,241-00-00

**OPERATOR:** License # KCC 4027.....  
Name Dalyn Enterprises, Inc.....  
Address P.O. Box 304.....  
City/State/Zip Toronto, Kans. 66777.....  
Contact Person Diana or Earl Abbey.....  
Phone (316) 637-2908.....

SE/4 SE/4 SW/4 Sec .. 22 Twp . 25. S, Rge ... 14 ☒ East  
(location) ☐ West

.....340..... Ft North from Southeast Corner of Section  
.....3249..... Ft West from Southeast Corner of Section  
(Note: Locate well on Section Plat on reverse side)

**CONTRACTOR:** License # 5661.....  
Name Kelly Down Drilling.....  
City/State Neosho Falls, Kans.....

Nearest lease or unit boundary line .....340..... feet.

County Woodson.....

Lease Name W.I. Tipton..... Well# D-1.....

Domestic well within 330 feet: ☐ yes ☒ no

Municipal well within one mile: ☐ yes ☐ no

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

Depth to Bottom of fresh water .....72..... feet

Lowest usable water formation ..... feet

Depth to Bottom of usable water .....100..... feet

Surface pipe by Alternate: 1 ☐ 2 ☒

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

Conductor pipe if any required ..... feet

Ground surface elevation ..... feet MSL

This Authorization Expires 10-12-85

Approved By 4-12-85 [Signature]

If OWWO: old well info as follows:

Operator .....  
Well Name .....  
Comp Date ..... Old Total Depth .....  
Projected Total Depth .....1660..... 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 4-12-85 Signature of Operator or Agent Diana Abbey Title President

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.

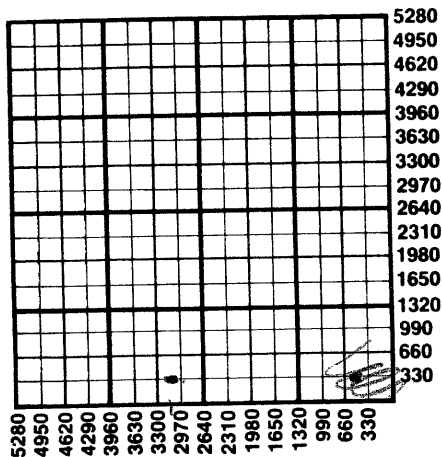
RECEIVED  
STATE CORPORATION COMMISSION

APR 12 1985  
A Regular Section of Land  
Conservation Division  
Wichita, Kansas

4-12-85

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