Sint

| For KCC Effective | Use: Date: | 10-806 |
|----------------------|---------------|-------------|
| District # | | 3 |
| SGA? | Yes | ∡ No |

Kansas Corporation Commission OIL & GAS CONSERVATION DIVISION

NOTICE OF INTENT TO DRILL

Form C-1 December 2002 Form must be Typed Form must be Signed All blanks must be Filled

Must be approved by KCC five (5) days prior to commencing well

| 5 | Spot SW-SW-NE-SE | 75 |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------|----------------|
| Expected Spud Date month day year | | ∕ East |
| monun day year | SE/4 NE SE SW. Sec. 33 Twp. 28 S. R. 22 | West |
| OPERATOR: License# 6766 | 1485feet from N / V S Line of Sec | |
| Name. N & W Enterprises Inc | 1155feet from F / E / W Line of Sec | tion |
| Address: 1111 S. Margrave | Is SECTION ✓ RegularIrregular? | |
| City/State/Zip: Fort Scott, KS 66701 | (Note: Locate well on the Section Plat on reverse side) | |
| Contact Person: Thomas L. Norris | County: Crawford | |
| Phone: 620-223-6559 or 620-224-0006 | Lease Name: Meyer Well #: 19 | |
| Phone: | Field Name: Walnut SE | |
| CONTRACTOR: License# 33734 | | |
| Name: Hat Drilling LLC | | ✓ No |
| | Target Information(s): Bartlesville | |
| Well Drilled For: Well Class: Type Equipment: | Nearest Lease or unit boundary: 660' | |
| ✓ Oil Enh Rec Infield ✓ Mud Rotary | | eet MSL |
| Gas Storage Pool Ext. Air Rotary | Water well within one-quarter mile: | = |
| OWWO Disposal Wildcat Cable | Public water supply well within one mile: | √ No |
| Seismic;# of Holes Other | Depth to bottom of fresh water: 1000' + | |
| | Depth to bottom of usable water: 1000' + | |
| Other | Surface Pipe by Alternate: 1 2 | |
| If OWWO: old well information as follows: | Length of Surface Pipe Planned to be set: 20' | |
| Operator: | Length of Conductor Pipe required: NA | |
| Well Name: | Projected Total Depth: 425' | |
| Original Completion Date:Original Total Depth: | Formation at Total Depth: Bartlesville | |
| Original Completion DateOriginal Iolal Depth. | Water Source for Drilling Operations: | |
| Directional, Deviated or Horizontal wellbore? Yes ✓ No | Well | |
| If Yes, true vertical depth: | DWR Permit #: | |
| Bottom Hole Location: | (Note: Apply for Permit with DWR) | |
| KCC DKT #: | | √ No |
| NOO DICT # | | (4-140 |
| | If Yes, proposed zone: | |
| AFFI | DAVIT | |
| The undersigned hereby affirms that the drilling, completion and eventual pl | ugging of this well will comply with K.S.A. 55 et. seq. | |
| It is agreed that the following minimum requirements will be met: | | |
| - | | |
| Notify the appropriate district office <i>prior</i> to spudding of well; A copy of the approved notice of intent to drill <i>shall be</i> posted on each | ch drilling rig: | |
| The minimum amount of surface pipe as specified below shall be se | It by circulating cement to the top; in all cases surface pipe shall be | set |
| through all unconsolidated materials plus a minimum of 20 feet into the | ne underlying formation. | |
| 4. If the well is dry hole, an agreement between the operator and the d | istrict office on plug length and placement is necessary prior to plug | ıging; |
| 5. The appropriate district office will be notified before well is either plug | ged or production casing is cemented in; | |
| 6. If an ALTERNATE II COMPLETION, production pipe shall be cement | ed from below any usable water to surface within 120 days of spud of | ate. |
| Or pursuant to Appendix "B" - Eastern Kansas surface casing order | #133,891-C, which applies to the KCC District 3 area, alternate ii ce | menting |
| must be completed within 30 days of the spud date or the well shall be | | .iig. |
| I hereby certify that the statements made herein are true and to the best of | my knowledge and belief. | |
| alach | (Later) - I layer | |
| Date: 9/29/06 Signature of Operator or Agent: | Title: frees, | |
| | Remember to: | • |
| For KCC Use ONLY | - File Drill Pit Application (form CDP-1) with Intent to Drill; | 160 |
| API # 15 - 037 -21849-000 | File Completion Form ACO-1 within 120 days of spud date; | W |
| Nore. | File acreage attribution plat according to field proration orders; | Ŋ, |
| Conductor pipe required | - Notify appropriate district office 48 hours prior to workover or re-en | iry; 🗄 😽 🔠 |
| Minimum surface pipe required teet per Alt. X (2) | - Submit plugging report (CP-4) after plugging is completed; | , L |
| Approved by: Kut 10-3-06 | Obtain written approval before disposing or injecting salt water. | E E |
| This authorization expires: 4-3-07 | - If this permit has expired (See: authorized expiration date) please | |
| (This authorization void if drilling not started within 6 months of effective date.) | check the box below and return to the address below. | CEIVED |
| , , , , , , , , , , , , , , , , , , , , | Well Not Drilled - Permit Expired | |
| Spud date: Agent: | Signature of Operator or Agent: | T-2 700F |
| | Date: | · L , , , , , |
| | | |

IN ALL CASES PLOT THE INTENDED WELL ON THE PLAT BELOW

Plat of acreage attributable to a well in a prorated or spaced field

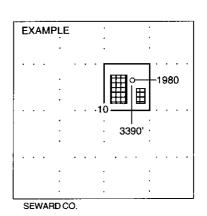
If the intended well is in a prorated or spaced field, please fully complete this side of the form. If the intended well is in a prorated or spaced field complete the plat below showing that the well will be properly located in relationship to other wells producing from the common source of supply. Please show all the wells and within 1 mile of the boundaries of the proposed acreage attribution unit for gas wells and within 1/2 mile of the boundaries of the proposed acreage attribution unit for oil wells.

| API No. 15 - 037-21849-0000 | Location of Well: County: Crawford |
|-----------------------------------------------|------------------------------------------------------------------------------------------------------|
| Operator: N & W Enterprises Inc | |
| Lease: Meyer | 1485 feet from N / ✓ SLine of Section 1155 feet from ✓ E / WLine of Section |
| Well Number: 19 Field: Walnut SE | Sec. 33 Twp. 28 S. R. 22 🗸 East Wes |
| Number of Acres attributable to well: 2 1/2 | Is Section: ✓ Regular or ☐ Irregular |
| QTR / QTR / QTR of acreage: SE/4 _ NE SE _ SW | If Section is irregular, locate well from nearest corner boundary. Section corner used: NE NW SE SW |

PLAT

(Show location of the well and shade attributable acreage for prorated or spaced wells.) (Show footage to the nearest lease or unit boundary line.)

| _ | | | | | | | | | | | | | | | | | | | | | | |
|-----|---|---|---|-------|---|---|--------|---|---|-------------------|----|----------------|-------------|---------|---|---------------|---|---|---|--------|---|--|
| | | | | | | | | | | - İ | | | | | | | | | | | | |
| | | | | | | | | | | ĺ | | | | | | | | | | | | |
| - | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | |
| ١. | | | | | | | | | | - | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | |
| | | | • | | • | | • | | | | | | - | | | | | | | • | | |
| | | | | | | | | | | | | | - | | | | | | | | | |
| i | | | | | | | | | | | | | | | | | | | | | | |
| 1 . | • | • | | • | • | • | • | • | • | ٠ | • | • | | • | • | • | • | ٠ | • | | • | |
| • | | | | | | | | | | | | | | | | | | | | | | |
| 1 | | | | | • | | | | | | | | | | | | | | | | | |
| ĺ | | | | | | | | | | | | | | | | | | | | • | | |
| 1 | | | • | | • | | • | | | | | | • | | | | | | | • | | |
| ļ., | | | | | | | | | | - | | | | | | | , | | | | | |
| i | | | | | | • | | | | . | | | | | | | | | | | | |
| İ | | | | | | | | | | | | Δ | | | | | | | | | | |
| | | | | | | | | | | | L | A. | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | • | | | | | | 1_ | | | | | • | | | | | | |
| | | | | | | | | | 5 | 6 | 10 | <i>†</i> - | | <u></u> | | - <u>·</u> | | | | | | |
| | | | | | | | : | | 5 | E | 19 | <i>t</i> | • | | | <u>:</u> : | | | | | | |
| | | | | | | | | | 5 | \mathcal{E}_{I} | 19 | <i>†</i> | · · | | | · · | | | | | | |
| | | | | | | | · · | | 5 | ϵ_{p} | 19 | / - | • | | | | | | | | | |
| | | | | | | | | , | 5 | | 19 | <i>†</i> - | - : : | | | · · · | | | | · · | | |
| | | | | | | | | ٠ | | \mathcal{E}_{i} | | ٠ | | | | | | | | • | | |
| | | | • | | | | • | ٠ | | 6 | | ٠ | | | | | | | | | | |
| | | | • | | | | • | ٠ | | | | ٠ | | | | | | | | | | |
| | | | • | | | | • | ٠ | | | | ٠ | | | | | | | | | - | |
| | | | • | | | | • | ٠ | | | | ٠ | | | | | | | | • | | |
| | | | • | | | | | | | 6 | | | | | | | | | | • | | |
| | | | | | | | • | | | | | | | | | | | | | • | | |
| | | | | | | | • | | | | | | | | | | | | | • | | |
| | | | | | | | • | | | | | | | | | | | | | • | | |
| | • | | | | | | • | | | | | | | | | | | | | • | | |
| | | | | | | | | | | E | | | | | | | | | | • | | |
| | | | | | | | • | | | | | | | | | | | | | • | | |
| | | | | | | | | | | E, | | | | | | | | | | • | | |
| | | | | | | | | | | E, | | | | | | | | | | • | | |



NOTE: In all cases locate the spot of the proposed drilling locaton.

In plotting the proposed location of the well, you must show:

- 1. The manner in which you are using the depicted plat by identifying section lines, i.e. 1 section, 1 section with 8 surrounding section ED 4 sections, etc. OCT - 2 2006
- 2. The distance of the proposed drilling location from the section's south / north and east / west.
- 3. The distance to the nearest lease or unit boundary line.
- 4. If proposed location is located within a prorated or spaced field a certificate of acreage attribution plat must be attached: (C0-KCCW-ICHITA CG-8 for gas wells).

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form CDP-1 January 2001 Form must be Typed

APPLICATION FOR SURFACE POND

Submit in Duplicate

| Operator Name: N & W Enterpris | ses Inc | License Number: 6766 | | | | | | |
|---------------------------------------------------------------------------------------------------------------|-------------------------------------------|--------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|--|--|--|--|--|
| Operator Address: 1111 S. Margrave |) | | | | | | | |
| Contact Person: Thomas L. Norri | S | Phone Number: (620) 223 - 6559 | | | | | | |
| Lease Name: Meyer (9 | | Pit Location: | | | | | | |
| Type of Pond: Emergency Pit Treatment Pit Workover Pit Drilling Pit | Pit is: ✓ Proposed If Existing, date of | - | N/2 of SE Qtr. Sec. 33 Twp. 28 R. 22 VE W 1485 Feet from N (S) (circle one) Line of Section | | | | | |
| Burn Pit (If WP Supply API No. or Year Drilled) | Pit capacity: | (bbls) | Feet from (E) W (circle one) Line of Section Crawford County | | | | | |
| Is the pit located in a Sensitive Ground Water | Area? Yes | No | Chloride concentration: mg/l (For Emergency Pits and Treatment Pits only) | | | | | |
| Is the bottom below ground level? ✓ Yes No | Artificial Liner? ☐ Yes ✓ | No | How is the pit lined if a plastic liner is not used? Mud | | | | | |
| Pit dimensions (all but working pits): 5' Depth fr | Length (fe | | | | | | | |
| If the pit is lined give a brief description of the material, thickness and installation procedure | | | edures for periodic maintenance and determining ncluding any special monitoring. | | | | | |
| Distance to nearest water well within one-mile | • | Depth to shallowest fresh water NA feet. Source of information: measured well owner electric log KDWR | | | | | | |
| Emergency, Treatment and Burn Pits ONL | | Drilling and Workover Pits ONLY: | | | | | | |
| Producing Formation: | | Type of material utilized in drilling/workover: | | | | | | |
| Number of producing wells on lease: | | Number of working pits to be utilized: 2 Abandonment procedure: Fill with earth | | | | | | |
| Barrels of fluid produced daily: Does the slope from the tank battery allow all flow into the pond? Yes No | spilled fluids to | Drill pits must be closed within 365 days of spud date. | | | | | | |
| I hereby certify that the above state | ements are true and | correct to the bes | t of my knowledge and belief. | | | | | |
| 09/29/2006 Date | | Thomas | ignature of Applicant or Agent | | | | | |
| KCC OFFICE USE ONLY | | | | | | | | |
| Date Received: 10/2/06 Permit Num | ber: | Perm | it Date: 10/2/04 Lease Inspection: RECEIVED | | | | | |

OCT - 2 2008