15-003-20,119-00	- O	$\subset$
------------------	-----	-----------

TO BE FILED WITH THE STATE CORPORATION COMMISSION PRIOR TO COMMENCEMENT OF WELL

1.	Operator James E. Russell Address Box 334 Iola, Kansas 66749
2.	Lease name S. Strain Well No. BO-6 County Anderson
3.	Well Location 810 FWL 1665 FNL NE/4 Sec. 9 Township 22-S Range 19-E
4.	Well to be drilled 810 ft. from nearest lease line.
5.	Drilling Contractor Oilwell Drilling, Company Address Iola, Kansas 66749
6.	Type of equipment: Rotary ☑ Cable Tool □. Approx. date operation to begin November 16 19670.
7.	Well to be drilled for Oil ₭ Gas □ Disposal □ Input □ Estimated Total Depth of Well 900 ft.
8.	Depth of deepest fresh water well within one mile of locationft. If none exists, write NONE_None
9.	Ground elevation at location is approxft. higher orft. lower than ground elevation at water well.
10.	Depth of the deepest municipal water well within three miles of location ft. If none exists, write NONE
11.	Operator states that he will set surface pipe at least 25 ft. below all Tertiary or unconsolidated deposits and, taking into con-
	sideration differences in ground elevations, that the minimum depth necessary, to the best of his knowledge and belief, to pro-
	tect all fresh water zones isft. and operator agrees to set surface pipe at this location to a depth of not less than
RE	MARKS: 6½" hole w/4½" casing cemented to surface

Signature of Operator\_

State Corporation Commission of Kansas Conservation Division
500 Insurance Building
212 North Market
Wichita, Kansas 67202

RECEIVED

NOV 1 J 1970

CONSERVATION DIVISION

Wichita, Kansas

// - 10 - 7

(IF PREFERRED, MAIL IN ENVELOPE)