

CARD MUST BE TYPED

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

CARD MUST BE SIGNED

Starting Date: MAR 27 1985
month day year

API Number 15- 003-22,602-00-00

OPERATOR: License # 9554

..... N. $\frac{1}{2}$ NE NW Sec .22. Twp .22 S, Rge .19. East
(location) West

Name OZARK RESOURCES INC.

Address BOX 345

City/State/Zip GARNETT, KANSAS 66032

Contact Person CLYDE BOOTS

Phone 316 852 3574

..... 5060 Ft North from Southeast Corner of Section
..... 3300 Ft West from Southeast Corner of Section
(Note: Locate well on Section Plat on reverse side)

CONTRACTOR: License # 5687

Name SUN DRILLING CO. Inc.

City/State PIQUA, KS 66761

Nearest lease or unit boundary line 220 feet.
County ANDERSON

Lease Name COOPER Well# 20
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 checked="" type="checkbox"/> Infield | <input checked="" type="checkbox"/> Mud Rotary |
| <input type="checkbox"/> Gas | <input type="checkbox"/> Inj | <input type="checkbox"/> Pool Ext. | <input type="checkbox"/> Air Rotary |
| <input type="checkbox"/> OWWO | <input type="checkbox"/> Expl | <input type="checkbox"/> Wildcat | <input type="checkbox"/> Cable |

Depth to Bottom of fresh water 0 feet
Lowest usable water formation NONE
Depth to Bottom of usable water 125 feet
Surface pipe by Alternate : 1 2
Surface pipe to be set 20 feet
Conductor pipe if any required NONE feet
Ground surface elevation 1090 feet MSL
This Authorization Expires 7-25-85
Approved By 3-25-85 [Signature]

If OWWO: old well info as follows:

Operator

Well Name

Comp Date Old Total Depth

Projected Total Depth 875 feet

Projected Formation at TD DARK SHALE

Expected Producing Formations SQUIRREL

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

Date 3-21-85 Signature of Operator or Agent

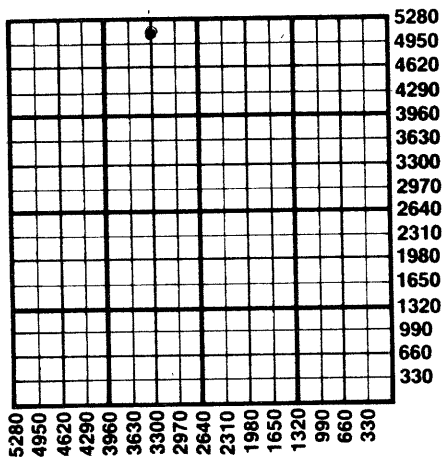
[Signature: Clyde Boots] Title Shareholder

MHC/40ME 3-25-85 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.

STATE CORPORATION
 03-25-85
 MAR 25 1985
 COMPLETION PERMITS
 WICHITA, KANSAS

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.
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