

CARD MUST BE TYPED

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

CARD MUST BE SIGNED

Starting Date: ..OCT.....4.....1985.....  
month day year

API Number 15- 003-22,686-00-00

OPERATOR: License # 9554

APAC E12  
.....  
(location) Sec 22. Twp 22. S, Rge 19.  East  
 West

Name OZARK RESOURCES INC.

Address BOX 345

..2860..... Ft North from Southeast Corner of Section

City/State/Zip GARNETT, KANSAS 66032

..1100..... Ft West from Southeast Corner of Section

Contact Person CLYDE BOOTS

(Note: Locate well on Section Plat on reverse side)

Phone 316.852.3574

Nearest lease or unit boundary line ....1100..... feet.

CONTRACTOR: License #

County ..ANDERSON.....

Name UNKNOWN

Lease Name ...COOPER..... Well# 21.E...

City/State

Domestic well within 330 feet :  yes  no

Well Drilled For: Well Class: Type Equipment:

Municipal well within one mile :  yes  no

Oil  Swd  Infield  \*Mud Rotary

Gas  Inj  Pool Ext.  Air Rotary

OWWO  Expl  Wildcat  Cable

Depth to Bottom of fresh water .....0.220..... feet

Lowest usable water formation .....NONE.....

If OWWO: old well info as follows:

Depth to Bottom of usable water .....125..... feet

Operator

Surface pipe by Alternate : 1  2

Well Name

Surface pipe to be set .....20..... feet

Comp Date Old Total Depth

Conductor pipe if any required .....0..... feet

Projected Total Depth ..8.75..... feet

Ground surface elevation .....1100..... feet MSL

Projected Formation at TD ..DARK SHALE.....

This Authorization Expires .....3-30-86.....

Expected Producing Formations ..SQUIRREL.....

Approved By .....9-30-85.....

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

Date 9-28-85 Signature of Operator or Agent

Clyde Boots Title Stockholder  
RCH/KOHE

