

EFFECTIVE DATE: 10-5-93

DISTRICT # 1

SEAT Yes No

State of Kansas

NOTICE OF INTENTION TO DRILL

FORM MUST BE SIGNED
FORM MUST BE SIGNED
ALL BLANKS MUST BE FILLED

Must be approved by the K.C.C. five (5) days prior to commencing well

Expected Spud Date 10 6 93
month day year

Spot SW SE SW Sec 36 Twp 10 S, Rg 12 EA

OPERATOR: License # 5184
Name: Shields Oil Producers, Inc.
Address: Shields Bldg
City/State/Zip: Russell, KS 67665
Contact Person: M.L. Ratts
Phone: 913-483-3141

330 feet from South / North line of Section
3630 feet from East / West line of Section

IS SECTION REGULAR IRREGULAR?
(NOTE: Locate well on the Section Plat on Reverse Side)

CONTRACTOR: License #: 5184
Name: Shields Drilling Company

County: Osborne
Lease Name: Taylor "D" Well #: 1
Field Name: Wildcat

Well Drilled For:	Well Class:	Type Equipment:
<input checked="" type="checkbox"/> Oil	<input type="checkbox"/> Enh Rec	<input type="checkbox"/> Infield <input checked="" type="checkbox"/> Mud Rotary
<input type="checkbox"/> Gas	<input type="checkbox"/> Storage	<input type="checkbox"/> Pool Ext. <input type="checkbox"/> Air Rotary
<input type="checkbox"/> OWD	<input type="checkbox"/> Disposal	<input checked="" type="checkbox"/> Wildcat <input type="checkbox"/> Cable
<input type="checkbox"/> Seismic;	<input type="checkbox"/> # of Holes	<input type="checkbox"/> Other
<input type="checkbox"/> Other		

Is this a Prorated/Spaced Field? yes no

Target Formation(s): Arbuckle
Nearest lease or unit boundary: 330
Ground Surface Elevation: 1685 feet
Water well within one-quarter mile: yes no
Public water supply well within one mile: yes no
Depth to bottom of fresh water: 485
Depth to bottom of usable water: 485 600
Surface Pipe by Alternate: 1 2
Length of Surface Pipe Planned to be set: 200
Length of Conductor pipe required: None

If OWD: old well information as follows:
Operator: _____
Well Name: _____
Comp. Date: _____ Old Total Depth _____

Projected Total Depth: 3950
Formation at Total Depth: Arbuckle

Directional, Deviated or Horizontal wellbore? yes no
If yes, true vertical depth: _____
Bottom Hole Location: _____

Water Source for Drilling Operations:
 well farm pond oth

DWR Permit #: _____
Will Cores Be Taken? yes no
If yes, proposed zone: _____

AFFIDAVIT

The undersigned hereby affirms that the drilling, completion and eventual plugging of this well will comply with K.S.A. 5101, et. seq.
It is agreed that the following minimum requirements will be met:

1. Notify the appropriate district office prior to spudding of well;
2. A copy of the approved notice of intent to drill shall be posted on each drilling rig;
3. The minimum amount of surface pipe as specified below shall be set 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 underlying formation;
4. If the well is dry hole, an agreement between the operator and the district office on plug length and placement necessary prior to plugging;
5. The appropriate district office will be notified before well is either plugged or production casing is cemented in;
6. IF AN ALTERNATE II COMPLETION, PRODUCTION PIPE SHALL BE CEMENTED FROM BELOW ANY USABLE WATER TO SURFACE WITHIN 120 DAYS OF SPUD DATE. IN ALL CASES, NOTIFY DISTRICT OFFICE PRIOR TO ANY CEMENTING.

I hereby certify that the statements made herein are true and to the best of my knowledge and belief.
Date: 9-30-93 Signature of Operator or Agent: M.L. Ratts Title: Prod. Supt.

FOR KCC USE:
API # 15- 141-20280-00-00
Conductor pipe required None feet
Minimum surface pipe required 200 feet per Alt. 2
Approved by: CB 10-1-93
This authorization expires: 4-1-94
(This authorization void if drilling not started within 6 months of effective date.)
Spud date: _____ Agent: _____

RECEIVED
STATE CORPORATION COMMISSION
OCT 01 1993
CONSERVATION DIVISION
Wichita, Kansas
10-1-93

- REMEMBER TO:
- File Drill Pit Application (form CDP-1) with Intent to Drill;
 - File Completion Form ACO-1 within 120 days of spud date;
 - File acreage attribution plat according to field proration orders;
 - Notify appropriate district office 48 hours prior to workover or re-entry;
 - Submit plugging report (CP-4) after plugging is completed;
 - Obtain written approval before disposing or injecting salt water.

Mail to: Conservation Division, 200 Colorado Derby Building, 202 W. First St., Wichita, Kansas 67202-1286.

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 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- _____
OPERATOR _____
LEASE _____
WELL NUMBER _____
FIELD _____

LOCATION OF WELL: COUNTY _____
_____ feet from south/north line of section
_____ feet from east/west line of section
SECTION _____ TWP _____ RG _____

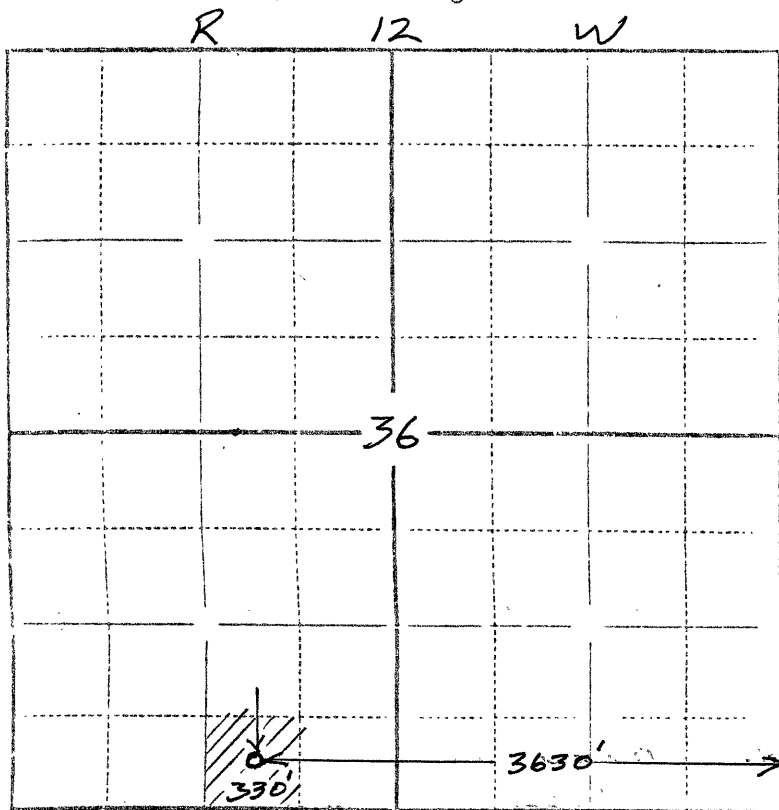
NUMBER OF ACRES ATTRIBUTABLE TO WELL _____
QTR/QTR/QTR OF ACREAGE _____

IS SECTION _____ REGULAR or _____ IRREGULAR
IF SECTION IS IRREGULAR, LOCATE WELL FROM NEAREST
CORNER BOUNDARY.

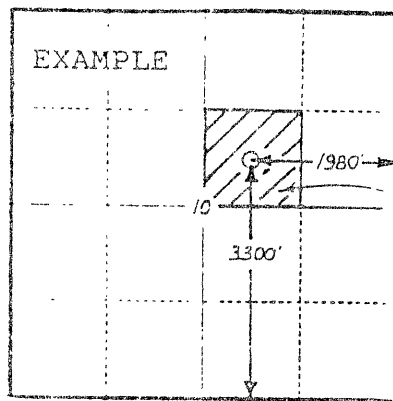
Section corner used: _____ NE _____ NW _____ SE _____ SW

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.)



OSBORNE CO.



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 sections, 4 sections, etc.;
- 2) the distance of the proposed drilling location from the section's south/north and east/west lines; and
- 3) the distance to the nearest lease or unit boundary line.