

CARD MUST BE TYPED

State of Kansas

CARD MUST BE SIGNED

NOTICE OF INTENTION TO DRILL

(see rules on reverse side)

Starting Date 9 6 85
month day year

API Number 15— 107-22,720-00-00

OPERATOR: License # 5756 app.
Name Triple I Energy Corp.
Address 6600 College Blvd. # 310
City/State/Zip Overland Park, KS 66211
Contact Person Lila Highfill
Phone 913-345-8000

..... East
NE. NW. NE. Sec. 12. Twp. 22. S, Rg. 21. West
..... 5250 Ft. from South Line of Section
..... 1350 Ft. from East Line of Section

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

CONTRACTOR: License #
Name Unknown
City/State

Nearest lease or unit boundary line 30 feet
County Linn

Lease Name ... Webber "C." Well # ... 46-W ...

Ground surface elevation n.a. feet MSL

Well Drilled For: Well Class: Type Equipment:
___ Oil ___ SWD Infield Mud Rotary
___ Gas Inj ___ Pool Ext. ___ Air Rotary
___ OWWO ___ Expl ___ Wildcat ___ Cable

Domestic well within 330 feet: ___ yes no

Municipal well within one mile: ___ yes no

Surface pipe by Alternate: 1 ___ 2

If OWWO: old well info as follows:

Operator
Well Name
Comp Date Old Total Depth

Depth to bottom of fresh water 75 feet

Depth to bottom of usable water 150 feet

Surface pipe planned to be set 20 feet

Projected Total Depth 900 feet

Formation Mississippian

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

_____ cementing will be done immediately upon setting production casing.

RCH for KCC

Date 9/6/85 Signature of Operator or Agent Susan Arnold Title As. Agent

For KCC Use:

Conductor Pipe Required feet; Minimum Surface Pipe Required feet per Alt. 1 2 _____

This Authorization Expires 3-6-86 Approved By 9-6-85 K

