

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— 107-22,738-00-00

OPERATOR: License # ..... 5756..... app ... NE..NE..NE Sec. 12. Twp. 22 S, Rg. 21 ... East  
Name ..... Triple I Energy Corp..... 5250..... Ft. from South Line of Section  
Address ..... 6600 College Blvd. # 310 ..... 440..... Ft. from East Line of Section  
City/State/Zip ..... Overland Park, KS 66211  
Contact Person ..... Lila Highfill  
Phone ..... 913-345-8000  
(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 ..... Ball "A"..... Well # ..... 487W

Well Drilled For: Well Class: Type Equipment:  
\_\_\_ Oil \_\_\_ SWD \_\_\_ ~~X~~nfield \_\_\_ ~~M~~ud Rotary  
\_\_\_ Gas \_\_\_ InjX \_\_\_ Pool Ext. \_\_\_ Air Rotary  
\_\_\_ OWWO \_\_\_ Expl \_\_\_ Wildcat \_\_\_ Cable

Ground surface elevation ..... n.a..... feet MSL  
Domestic well within 330 feet: \_\_\_ yes \_\_\_ ~~n~~X  
Municipal well within one mile: \_\_\_ yes \_\_\_ ~~n~~X  
Surface pipe by Alternate: 1 \_\_\_ 2 \_\_\_ ~~3~~  
Depth to bottom of fresh water ..... 75.....  
Depth to bottom of usable water ..... 150.....  
Surface pipe planned to be set ..... 20.....  
Projected Total Depth ..... 900..... feet  
Formation ..... Mississippian

If OWWO: old well info as follows:  
Operator .....  
Well Name .....  
Comp Date ..... Old Total Depth.....

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 KOHE*  
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 ~~3~~  
This Authorization Expires ..... 3-9-86 ..... Approved By ..... 9-9-85 *R*.....

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.

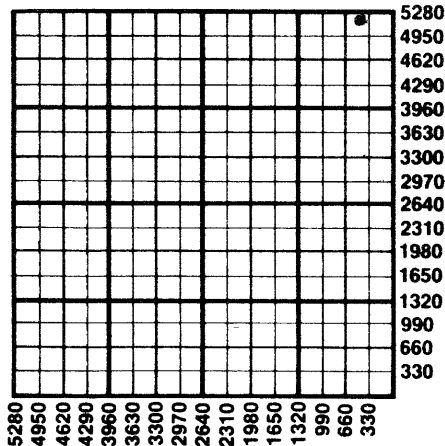
9-6-85

RECEIVED  
STATE CORPORATION COMMISSION

SEP 6 1985

A Regular Section of Land

1 Mile = 5,280 Ft. CONSERVATION DIVISION  
Wichita, Kansas



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 filing Intent, prepare a proposed plugging plan in case well is D & A, then obtain approval of plan when calling district office prior to setting surface pipe.
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