

CARD MUST BE TYPED

State of Kansas

CARD MUST BE SIGNED

NOTICE OF INTENTION TO DRILL

(see rules on reverse side)

Expected Spud Date. 1 29 88
month day year

API Number 15-107-22.953-00-00

OPERATOR: License # 03093

E/2 NW SE Sec. 18 Twp. 22 S, Rg. 22 East West

Name CHAZ Oil Corporation

1980 Ft. from South Line of Section

Address P.O. Box 281

1540 Ft. from East Line of Section

City/State/Zip Paola, Kansas 66071

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

Contact Person Mark Swope

Nearest lease or unit boundary line 1100 feet

Phone (913) 755-2128

County Linn

CONTRACTOR: License # 6451

Lease Name Wright Well # 16-88

Name Big "E" Drilling

Ground surface elevation ±1000 feet MSL

City/State Centerville, Kansas

Domestic well within 330 feet: yes no

Well Drilled For: Well Class: Type Equipment:

Municipal well within one mile: yes no

Oil Storage Infield Mud Rotary

Depth to bottom of fresh water 20'

Gas Inj Pool Ext. Air Rotary

Depth to bottom of usable water 150'

OWWO Expl Wildcat Cable

Surface pipe by Alternate: 1 2

If OWWO: old well info as follows:

Surface pipe planned to be set 20'

Operator

Conductor pipe required

Well Name

Projected Total Depth 700' feet

Comp Date Old Total Depth

Formation Bartlesville

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

Date 1/26/88 Signature of Operator or Agent *Mark Swope* Title *Agent*

For KCC Use:

Conductor Pipe Required _____ feet; Minimum Surface Pipe Required _____ feet per Alt. 20

This Authorization Expires 7-29-88 Approved By *P.H. 1-29-88*

EFFECTIVE DATE: 2-3-88

