

CARD MUST BE TYPED

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

CARD MUST BE SIGNED

Starting Date:6.....21.....84.....
month day year 4:03

API Number 15- 107-22,313-00-00

OPERATOR: License #5756.....

.....NW... Sec 35.. Twp 22.. S, Rge .21. East
(location) West

NameTriple J Energy Corp.....

Address6600 College Blvd. #310.....

City/State/ZipOverland Park, KS...66211.....

Contact Person ..Jeff Taylor.....

Phone913.242-0506.....

.....4620..... Ft North from Southeast Corner of Section
.....3300..... Ft West from Southeast Corner of Section
(Note: Locate well on Section Plat on reverse side)

CONTRACTOR: License #5678.....

NameBrady Drilling Co.....

City/StateRoute 1, Paola, KS....66071.....

Nearest lease or unit boundary line660..... feet.
CountyLinn.....

Lease NameHolmes..... Well# A-29.....

Domestic well within 330 feet: yes no

Municipal well within one mile: yes no

Well Drilled For: Well Class: Type Equipment:

- | | | | |
|---|-------------------------------|---|--|
| <input checked="" type="checkbox"/> Oil | <input type="checkbox"/> Swd | <input checked="" type="checkbox"/> Infield | <input checked="" type="checkbox"/> Mud Rotary |
| <input type="checkbox"/> Gas | <input type="checkbox"/> Inj | <input type="checkbox"/> Pool Ext. | <input type="checkbox"/> Air Rotary |
| <input type="checkbox"/> OWWO | <input type="checkbox"/> Expl | <input type="checkbox"/> Wildcat | <input type="checkbox"/> Cable |

Depth to Bottom of fresh water75..... feet

Lowest usable water formation ...Dennis Limestone.....

Depth to Bottom of usable water150..... feet

Surface pipe by Alternate: 1 2

Surface pipe to be set20..... feet

Conductor pipe if any required feet

Ground surface elevation feet MSL

This Authorization Expires12-20-84.....

Approved By6-20-84.....

If OWWO: old well info as follows:

Operator

Well Name

Comp Date Old Total Depth

Projected Total Depth900..... feet

Projected Formation at TD

Expected Producing Formations

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

Date6/20/84..... Signature of Operator or Agent

DeAnne Corliss Title As Agent
MHC/KOHE 6-20-84

Must be filed with the K.C.C. five (5) days prior to commencing well
drilling or not started within six (6) months of date received by K.C.C.

RECEIVED
STATE CORPORATION COMMISSION

6-20-84

JUN 20 1984

Important procedures to follow:

A Regular Section of Land
1 Mile = 5,280 Ft.

CONSERVATION DIVISION
Wichita, Kansas

																		5280
																		4950
																		4620
																		4290
																		3960
																		3630
																		3300
																		2970
																		2640
																		2310
																		1980
																		1650
																		1320
																		990
																		660
																		330
5280	4950	4620	4290	3960	3630	3300	2970	2640	2310	1980	1650	1320	990	660	330			

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 plugging, prepare a plugging plan, then obtain agreement from the appropriate district office for an approved plugging plan.
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