

CARD MUST BE TYPED

State of Kansas

CARD MUST BE SIGNED

# NOTICE OF INTENTION TO DRILL

(see rules on reverse side)

Starting Date ..... October 8 .. 1985 ..  
month day year 3:50

API Number 15- 037-2,368-00-00

OPERATOR: License # ..... 9418 .....  
Name ..... Bonanza Energy Corp. .....  
Address ..... P.O. Box A .....  
City/State/Zip ..... Benedict, KS 66714 .....  
Contact Person ..... Douglas Lamb .....  
Phone ..... (316) 698-2495 .....

..... X East  
..... SW .. SE .. SW Sec. 26 Twp. 28 S, Rg. .... 21 West  
..... 165 ..... Ft. from South Line of Section  
..... 3725 ..... Ft. from East Line of Section

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

CONTRACTOR: License # .....  
Name ..... Company Tools .....  
City/State .....

Nearest lease or unit boundary line ..... 165 ..... feet  
County ..... Crawford .....  
Lease Name ..... Little ..... Well # ..... 13-A  
Ground surface elevation ..... 887 ..... feet MSL

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

Domestic well within 330 feet: \_\_\_\_\_ yes X no  
Municipal well within one mile: \_\_\_\_\_ yes X no  
Surface pipe by Alternate: 1 \_\_\_\_\_ 2 X \_\_\_\_\_

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

Depth to bottom of fresh water ..... 20 .....  
Depth to bottom of usable water ..... 100 .....  
Surface pipe planned to be set ..... 20 .....  
Projected Total Depth ..... 450 ..... feet  
Formation ..... Bartlesville .....

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.

Date ..... 10/7/85 ..... Signature of Operator or Agent Susan Arnold ..... Title As Agent .....

For KCC Use:

Conductor Pipe Required ..... 4-7-86 ..... feet; Minimum Surface Pipe Required ..... 10-7-85 ..... feet per Alt. 2  
This Authorization Expires ..... 4-7-86 ..... Approved By [Signature] .....

