

CARD MUST BE TYPED

CARD MUST BE SIGNED

State of Kansas  
NOTICE OF INTENTION TO DRILL

(see rules on reverse side)

Starting Date ..... October 12, 1985 .....  
month day year

API Number 15 - 037-21,370-0000

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

app. NW NE NW Sec. 35 Twp. 28 S, Rg. 21. East  
5115 West  
3555 Ft. from South Line of Section  
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 O'Brien Well # 11  
Ground surface elevation ..... 888 ..... 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   
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

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.

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

For KCC Use:

Conductor Pipe Required ..... feet; Minimum Surface Pipe Required ..... feet per ft. 1 2

This Authorization Expires 4-7-86 Approved By 10-7-85

