

CARD MUST BE TYPED

* Corrected Location

State of Kansas
NOTICE OF INTENTION TO DRILL

(see rules on reverse side)

Corrected
CARD MUST BE SIGNED

12-21-84

Starting Date: 11 23 84
month day year

API Number 15- 037-21,307-00-00

OPERATOR: License # 6001

* NW SW Sec 26 Twp 28 S Rge 21 East
(location)

Name Robert E. Austin

Address P.O. Box 1406

City/State/Zip Miami, Oklahoma 74355

Contact Person Robert E. Austin

Phone 918-540-1995

* 825 Ft North from Southeast Corner of Section
* 4785 Ft West from Southeast Corner of Section
(Note: Locate well on Section Plat on reverse side)

CONTRACTOR: License # 5667

Name Howard Lavery

City/State Chanute, Kansas

Nearest lease or unit boundary line 825 feet.

County Crawford

Lease Name Fox Well# 4-A

Domestic well within 330 feet : yes no

Municipal well within one mile : yes no

Well Drilled For: Well Class: Type Equipment:

Oil Swd

Infield

Mud Rotary

Gas Inj

Pool Ext.

Air Rotary

OWWO Expl

Wildcat

Cable

Depth to Bottom of fresh water feet

Lowest usable water formation

Depth to Bottom of usable water 100 feet

Surface pipe by Alternate : 1 2

Surface pipe to be set 20 feet

Conductor pipe if any required feet

Ground surface elevation feet MSL

This Authorization Expires 5-15-85

Approved By 11-15-84

If OWWO: old well info as follows:

Operator

Well Name

Comp Date Old Total Depth

Projected Total Depth 440 feet feet

Projected Formation at TD Bartlesville

Expected Producing Formations Bartlesville

I certify that we will comply with K.S.A. 55-101, et seq., plus eventually plugging hole to K.C.C. specifications. *kwos: SWSWSWSW 165FSL*

Date 12/18/84 Signature of Operator or Agent

Robert Austin Title *Owner*

5115FEL

