

CARD MUST BE TYPED

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

CARD MUST BE SIGNED

Starting Date: 06/05/85
month day year

API Number 15- 037-21,341-00-00

OPERATOR: License # 6001

. SE. . SW. SW. Sec . .26 Twp .28. S, Rge 21. . East
(location) West

Name Robert E. Austin

Address P.O. Box 1406

City/State/Zip Miami, OK 74355

Contact Person Max Alcock

Phone 316-431-4267

..... 165..... Ft North from Southeast Corner of Section
..... 4450..... Ft West from Southeast Corner of Section
(Note: Locate well on Section Plat on reverse side)

CONTRACTOR: License # 5667

Name Howard Laverly

City/State Chanute, Kansas

Nearest lease or unit boundary line 165..... feet.

County Crawford

Lease Name Fox A Well# 10-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

If OWWO: old well info as follows:

Operator

Well Name

Comp Date Old Total Depth

Projected Total Depth 450 feet

Projected Formation at TD Bartlesville

Expected Producing Formations Cattleman

Depth to Bottom of fresh water feet

Lowest usable water formation feet

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 11-30-85

Approved By 5-30-85 to

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

Date 5/25/85 Signature of Operator or Agent

Robert E. Austin

RCA for KAME
Operator

