

OWWO

For KCC Use: Effective Date: 7-7-07 District # 3 SGA? Yes No

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION NOTICE OF INTENT TO DRILL

Form C-1 December 2002 Form must be Typed Form must be Signed All blanks must be Filled

Must be approved by KCC five (5) days prior to commencing well

Expected Spud Date July 07, 2007

Spot SE SE NW Sec. 17 Twp. 28 S. R. 11 East West 3904 feet from N / S Line of Section 2600 2985 per spot feet from E / W Line of Section Is SECTION Regular Irregular?

OPERATOR: License# 33844 Name: Black Gold Well Service, Inc. Address: 9668 NW Parallel City/State/Zip: Towanda, KS 67144 Contact Person: Jeremy Hurt Phone: 316-323-4734

(Note: Locate well on the Section Plat on reverse side) County: Greenwood Lease Name: Higbee Well #: 4 Field Name: SEVERY

CONTRACTOR: License# 33844 Name: Black Gold Well Service, Inc.

Is this a Prorated / Spaced Field? Yes No Target Formation(s): LOWER KANSAS CITY Nearest Lease or unit boundary: Harper Lease (200 feet)

Well Drilled For: Oil Gas OWWO Seismic; # of Holes Other Well Class: Enh Rec Storage Disposal Other Type Equipment: Infield Pool Ext. Wildcat Mud Rotary Air Rotary Cable

Ground Surface Elevation: 1088 est. feet MSL Water well within one-quarter mile: Yes No Public water supply well within one mile: Yes No

If OWWO: old well information as follows: Operator: Hi-Lo Oil Co. Well Name: Higbee #4 Original Completion Date: 1982 Original Total Depth: 1226.8

Depth to bottom of fresh water: 100 ft Depth to bottom of usable water: 100 ft Surface Pipe by Alternate: 1 2 Length of Surface Pipe Planned to be set: 82 feet cemented to top

Directional, Deviated or Horizontal wellbore? Yes No If Yes, true vertical depth: Bottom Hole Location: KCC DKT #:

Length of Conductor Pipe required: 1220 ft cemented to top Projected Total Depth: 1226.8 Formation at Total Depth: Lower Kansas City

Water Source for Drilling Operations: Well Farm Pond Other DWR Permit #: (Note: Apply for Permit with DWR)

Will Cores be taken? Yes No If Yes, proposed zone: RECEIVED KANSAS CORPORATION COMMISSION

AFFIDAVIT

The undersigned hereby affirms that the drilling, completion and eventual plugging of this well will comply with K.S.A. 55 et. seq. JUN 29 2007

- 1. Notify the appropriate district office prior to spudding of well;
2. A copy of the approved notice of intent to drill shall be posted on each drilling rig;
3. The minimum amount of surface pipe as specified below shall be set by circulating cement to the top;
4. If the well is dry hole, an agreement between the operator and the district office on plug length and placement is necessary prior to plugging;
5. The appropriate district office will be notified before well is either plugged or production casing is cemented in;
6. If an ALTERNATE II COMPLETION, production pipe shall be cemented to any usable water to surface within 120 days of spud date.

I hereby certify that the statements made herein are true and to the best of my knowledge and belief. Date: 6-25-07 Signature of Operator or Agent: [Signature] Title: RESIDENT

For KCC Use ONLY API # 15 - 073-22120-00-01 Conductor pipe required None feet Minimum surface pipe required 62 feet per Alt. X(2) Approved by: [Signature] This authorization expires: 1-2-08 Spud date: Agent:

- Remember to: - File Drill Pit Application (form CDP-1) with Intent to Drill; - File Completion Form ACO-1 within 120 days of spud date; - File acreage attribution plat according to field proration orders; - Notify appropriate district office 48 hours prior to workover or re-entry; - Submit plugging report (CP-4) after plugging is completed; - Obtain written approval before disposing or injecting salt water.

17 28 11E

IN ALL CASES PLOT THE INTENDED WELL ON THE PLAT BELOW

Plat of acreage attributable to a well in a prorated or spaced field

If the intended well is in a prorated or spaced field, please fully complete this side of the form. If the intended well is in a prorated or spaced field complete the plat below showing that the well will be properly located in relationship to other wells producing from the common source of supply. Please show all the wells and within 1 mile of the boundaries of the proposed acreage attribution unit for gas wells and within 1/2 mile of the boundaries of the proposed acreage attribution unit for oil wells.

22120-00-01

API No. 15 - ~~073-76379~~
 Operator: Black Gold Well Service, Inc.
 Lease: Higbee
 Well Number: 4
 Field: SEVERY

Number of Acres attributable to well: @ 30
 QTR / QTR / QTR of acreage: SE - SE - NW

Location of Well: County: Greenwood
 3904 feet from N / S Line of Section
~~2600~~ 2985 feet from E / W Line of Section
 Sec. 17 Twp. 28 S. R. 11 East West

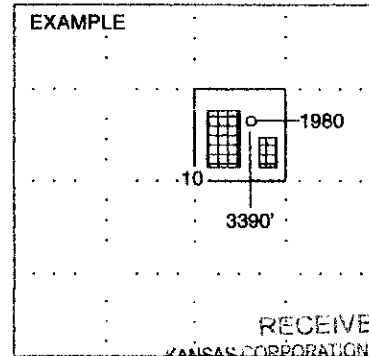
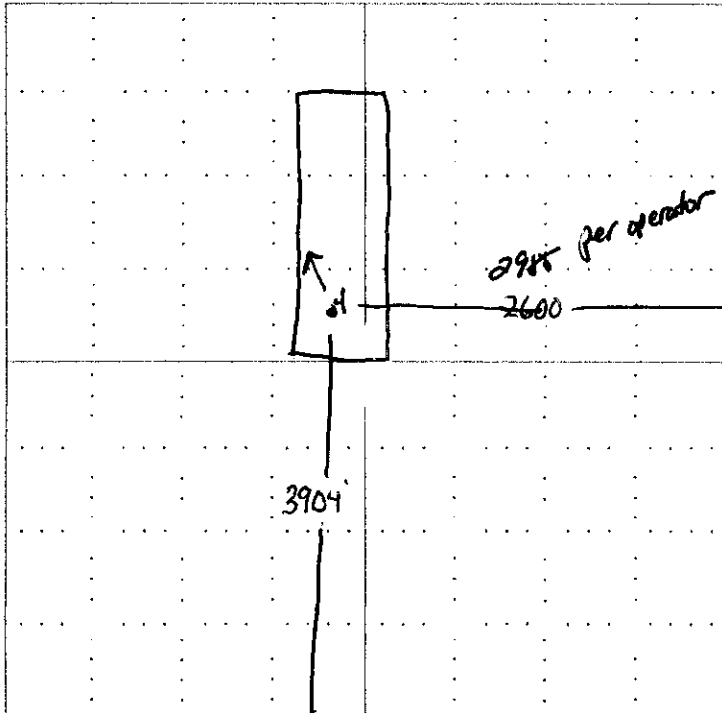
Is Section: Regular or Irregular

If Section is Irregular, locate well from nearest corner boundary.

Section corner used: NE NW SE SW

PLAT

*(Show location of the well and shade attributable acreage for prorated or spaced wells.)
 (Show footage to the nearest lease or unit boundary line.)*



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 SEWARD CO.

JUN 29 2007

CONSERVATION DIVISION
 WICHITA, KS

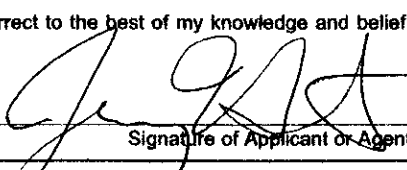
In plotting the proposed location of the well, you must show:

1. The manner in which you are using the depicted plat by identifying section lines, i.e. 1 section, 1 section with 8 surrounding sections, 4 sections, etc.
2. The distance of the proposed drilling location from the section's south / north and east / west.
3. The distance to the nearest lease or unit boundary line.
4. If proposed location is located within a prorated or spaced field a certificate of acreage attribution plat must be attached: (CO-7 for oil wells; CG-8 for gas wells).

**KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
APPLICATION FOR SURFACE PIT**

Form GDP-1
April 2004
Form must be Typed

Submit in Duplicate

Operator Name: Black Gold Well Service, Inc.		License Number: 33844
Operator Address: 9868 NW Parallel Towanda, KS 67144		
Contact Person: Jeremy Hurt		Phone Number: (316) 323 - 4734
Lease Name & Well No.: Higbee #4		Pit Location (QQQQ): SE SE SE NW
Type of Pit: <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Burn Pit <input type="checkbox"/> Settling Pit <input type="checkbox"/> Drilling Pit <input checked="" type="checkbox"/> Workover Pit <input type="checkbox"/> Haul-Off Pit <small>(If WP Supply API No. or Year Drilled)</small> 15-073-76379	Pit is: <input checked="" type="checkbox"/> Proposed <input type="checkbox"/> Existing If Existing, date constructed: _____ Pit capacity: _____ (bbls)	Sec. 17 Twp. 28 R. 11 <input checked="" type="checkbox"/> East <input type="checkbox"/> West 3904 Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section 2600 2985 per op Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section Greenwood _____ County
Is the pit located in a Sensitive Ground Water Area? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Chloride concentration: _____ mg/l <small>(For Emergency Pits and Settling Pits only)</small>
Is the bottom below ground level? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Artificial Liner? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	How is the pit lined if a plastic liner is not used? compacted soil
Pit dimensions (all but working pits): 8 Length (feet) 8 Width (feet) N/A: Steel Pits Depth from ground level to deepest point: 4 (feet)		
If the pit is lined give a brief description of the liner material, thickness and installation procedure.		Describe procedures for periodic maintenance and determining liner integrity, including any special monitoring.
Distance to nearest water well within one-mile of pit -NONE feet Depth of water well _____ feet		Depth to shallowest fresh water 100 feet. Source of information: _____ measured _____ well owner _____ electric log <input checked="" type="checkbox"/> KDWR
Emergency, Settling and Burn Pits ONLY: Producing Formation: _____ Number of producing wells on lease: _____ Barrels of fluid produced daily: _____ Does the slope from the tank battery allow all spilled fluids to flow into the pit? <input type="checkbox"/> Yes <input type="checkbox"/> No		Drilling, Workover and Haul-Off Pits ONLY: Type of material utilized in drilling/workover: Fresh Water Number of working pits to be utilized: 1 Abandonment procedure: pump out fluid until dry, then backfill _____ Drill pits must be closed within 365 days of spud date.
I hereby certify that the above statements are true and correct to the best of my knowledge and belief.		
6-25-07 Date	 Signature of Applicant or Agent	RECEIVED KANSAS CORPORATION COMMISSION JUN 29 2007
KCC OFFICE USE ONLY		
Date Received: 6/29/07 Permit Number: _____ Permit Date: 7/2/07 Lease Inspection: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

15-073-22120-00-01

COMMISSION
SION
F. BUILDING
ROOM 2078
67202

WELL PLUGGING RECORD
K.A.R.-82-3-117

073-22120-0000

API NUMBER 073-22-152

LEASE NAME Higbee

WELL NUMBER 4

TYPE OR PRINT
NOTICE: Fill out completely
and return to Cons. Div.
office within 30 days.

3904 Ft. from S Section Line

345 Ft. from E Section Line

SEC. 17 TWP. 28 RGE. 11 (E) or (W)

COUNTY Greenwood

Date Well Completed 12-9-81

Plugging Commenced 3-12-96

Plugging Completed 3-12-96

LEASE OPERATOR Hi-Lo Oil

ADDRESS Box 212 Severy, KS 67137

PHONE# () _____ OPERATORS LICENSE NO. 4685

Character of Well oil

(Oil, Gas, D&A, SWD, Input, Water Supply Well)

The plugging proposal was approved on 3-12-96 (date)

by Mike Hefferd (KCC District Agent's Name).

Is ACO-1 filed? _____ If not, Is well log attached? _____

Producing Formation _____ Depth to Top _____ Bottom _____

Show depth and thickness of all water, oil and gas formations.

OIL, GAS OR WATER RECORDS

CASING RECORD

Formation	Content	From	To	Size	Put In	Pulled out
				7"	62'	NONE
				4 1/2"	1220'	NONE

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KANSAS COMM. DIV.
APR - 9
11:31

Describe in detail the manner in which the well was plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. If cement or other plugs were used, state the character of same and depth placed, from _____ feet to _____ feet each set.

(If additional description is necessary, use BACK of this form.)

Name of Plugging Contractor Sun Cementing License No. 6113

Address 702 E. 2nd, Eureka, KS 67045

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Orville Higbee

STATE OF KANSAS COUNTY OF Greenwood, ss.

(Employee of Operator) or (Operator) of above-described well, being first duly sworn on oath, says: That I have knowledge of the facts, statements, and matters herein contained and the log of the above-described well as filed that the same are true and correct, so help me God.

(Signature) Orville Higbee

(Address) Severy, KS 67137

Subscribed and sworn to before me this 4 day of Apr, 19 96

[Signature]
Notary Public

My Commission Expires: 2-9-97

