For KCC Use: 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

| Expected Spud Date | July | 19 | 2004 | Spot | | | | | ✓ East |
|--|--|--|--|--|--|--|--|--|---------------------------------------|
| Expected Optio Date | month | day | year | PNW _ NESW _ | sw , | 31 | 30 | s 22 | West |
| 3.4 | 73 1/ | | | | | feet from | | | |
| OPERATOR: License# 34 | 73 0 | | | 907.5 | | foot from | E/VW | Line of C | ection |
| Name: William I. Wax | | | | Is SECTION | Pogular | - leet itom | E/EW | Line of S | ection |
| Address; P. O. Box 276 | 66753 | | | IS SECTION | пеушаг | Irregu | nar? | | |
| City/State/Zip: McCune, KS | | | · · · · · · · · · · · · · · · · · · · | | e: Locate we | ll on the Section | on Plat on rever | rse side) | |
| Contact Person: Bill Wax | | | | County: Crawford | | | | 005 | |
| Phone: 620-724-3400 | | | · · · · · · · · · · · · · · · · · · · | Lease Name: Unde | erwood | | | Well #: UZ5 | |
| CONTRACTOR: License# | 3473 V | | | Field Name: McCu | ine | | | | |
| Name: Co. Tools | | | | Is this a Prorated / | | | • | Ye | es 🗸 No |
| Name. | | | | Target Formation(s | s): Cattlem | en 🗾 | | | |
| Well Drilled For: | Well Class: | : Type E | quipment: | Nearest Lease or | unit bound | ary: | | | |
| Oil / Enh Re | ec 🔽 Infield | <u></u> | ud Rotary | Ground Surface Ele | evation: | | | | _feet MSL |
| ✓ Gas Storag | | | r Rotary | Water well within o | - | | | | es 🔽 No 🖊 |
| OWWO Dispos | | | able | Public water supply | | | | Y | es 🔽 No |
| Seismic;# of | | | aoro | Depth to bottom of | | | <u> </u> | | |
| Other | Tioles Other | | | Depth to bottom of | f usable w | ater: 100 | | | |
| | | | | Surface Pipe by Alt | | 1 🗸 2 | | | |
| If OWWO: old well informa | ition as follows: | | | Length of Surface | Pipe Plani | ned to be set | : 20. | | |
| Operator: N/A | | | | Length of Conduct | | quired: N/A | | | |
| Weil Name: | | | | Projected Total De | • | | | | |
| Original Completion De | ate: | _Original Total | Depth: | Formation at Total | Depth: | Bartlesville | | | |
| | | _ | | Water Source for I | Drilling Ope | rations: | | | |
| Directional, Deviated or Ho | | | Yes 🗸 No | Well F | Farm Pond | Other _ | AIR | | · · · · · · · · · · · · · · · · · · · |
| If Yes, true vertical depth:_ | | | | DWR Permit #: | | | | | |
| Bottom Hole Location: | | | | | (Note: Ap | pply for Permit | with DWR 🔲 j | | _ |
| KCC DKT #: | | | | Will Cores be taker | n? | | | Y | es 🗸 No |
| | | | | If Yes, proposed ze | one: | | | | |
| | | | AFF | IDAVIT | | | | RECEI | VFD |
| The undersigned hereby a | affirms that the d | rilling, comple | | | i comply w | ith K.S.A. 55 | | | |
| It is agreed that the follow | | | | | | | | | |
| Notify the appropria | • | • | | | | | I | UL 12 | 2007 |
| 2. A copy of the appro | | • | • | ch drillina ria: | | | J | <u> </u> | Loo. |
| 3. The minimum amou | | | | | nt to the to | p; in all case | es surface pla | AS INDIANCE IO | N-SWISION |
| | | | | | | | | | |
| through all unconso | | | | | | | | WICHITA | |
| through all unconso 4. If the well is dry hol | le, an agreemen | nt between the | operator and the o | listrict office on plug le | ength and | | necessary p | | ugging; |
| through all unconso 4. If the well is dry hol 5. The appropriate dist | le, an agreemen trict office will be | nt between the notified befor | operator and the crewell is either plug | district office on plug le | ength and sing is cen | ented in; | | rior to pl | + |
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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.

| API No. 15 - 037-21924-0000 | Location of Well: County: Crawford |
|---------------------------------------|--|
| Operator: William T. Wax | 1155 feet from N / V S Line of Section |
| Lease: Underwood | 907.5 feet from E / W Line of Section |
| Well Number: Q25 Field: McCune | Sec. 31 Twp. 30 S. R. 22 East Wes |
| Number of Acres attributable to well: | Is Section: Regular or Irregular |
| QTR / QTR / QTR of acreage: | If Section is Irregular, locate well from nearest corner boundary. Section corner used: NE NW SE SW |

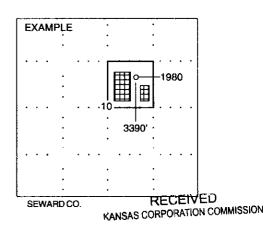
ΡΙ ΔΤ

(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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NOTE: In all cases locate the spot of the proposed drilling locaton.



JUL 1 2 2007

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

CONSERVATION DIVISION

- 1. The manner in which you are using the depicted plat by identifying section lines, i.e. 1 section, 1 section with 8 surrounding settles, KS 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.
- If proposed location is located within a prorated or spaced field a certificate of acreage attribution plat must be attached: (C0-7 for oil wells; CG-8 for gas wells).

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form CDP-1 April 2004 Form must be Typed

APPLICATION FOR SURFACE PIT

Submit in Duplicate

| Operator Name: William T. Wax | | License Number: 3473 | | | |
|--|---------------------------------------|--|--|--|--|
| Operator Address: P. O. Box 276 | McCune, K | S 66753 | | | |
| Contact Person: Bill Wax | | | Phone Number: (620) 724 - 3400 | | |
| Lease Name & Well No.: Underwood | Q25 | | Pit Location (QQQQ): | | |
| Type of Pit: Pit is: | | | E2NW NE SW SW | | |
| Emergency Pit Burn Pit | Proposed If Existing, date or | Existing energy retails | Sec. 31 Twp. 30 R. 22 East West | | |
| Settling Pit ✓ Drilling Pit ✓ Workover Pit ✓ Haul-Off Pit (If WP Supply API No. or Year Drilled) | Pit capacity: | (bbls) | Feet from North / South Line of Section 907.5 Feet from East / West Line of Section | | |
| Is the pit located in a Sensitive Ground Water | Area? Yes | No No | Chloride concentration: mg/l (For Emergency Pits and Settling Pits only) | | |
| Is the bottom below ground level? Yes No | Artificial Liner? | No | How is the pit lined if a plastic liner is not used? Native Clay | | |
| Pit dimensions (all but working pits): Depth fr | Length (fe | | i i | | |
| If the pit is lined give a brief description of the material, thickness and installation procedure | | | edures for periodic maintenance and determining ncluding any special monitoring. | | |
| N/A | | N/A | | | |
| Distance to nearest water well within one-mile | e of pit | Depth to shallowest fresh water unknown feet. Source of information: | | | |
| N/A feet Depth of water well | feet | measured well owner electric log KDWR | | | |
| Emergency, Settling and Burn Pits ONLY: | | Drilling, Workover and Haul-Off Pits ONLY: | | | |
| Producing Formation: | | Type of material utilized in drilling/workover: AIR | | | |
| Number of producing wells on lease: Barrels of fluid produced daily: | <u> </u> | Number of working pits to be utilized: 1 Abandonment procedure: Backfill When Dry | | | |
| Does the slope from the tank battery allow all flow into the pit? Yes No | spilled fluids to | | procedure: Backfill When Dry be closed within 365 days of spud date. | | |
| I hereby certify that the above state | ements are true and | correct to the bes | KANSAS CORPORATION COMMI | | |
| 7/10/07 Date | · · · · · · · · · · · · · · · · · · · | M | JUL 1 2 2007 Agridature of Applicant or Agent ONSERVATION DIVISION | | |
| | КСС | OFFICE USE O | NLY WICHITA, KS | | |
| Date Received: 7/12/07 Permit Num | nber: | Perm | it Date: 7/12/07 Lease Inspection: Yes TNo | | |