

For KCC Use: 11-26-07
 Effective Date: 3
 District # 3
 SGA? Yes No

KANSAS CORPORATION COMMISSION
 OIL & GAS CONSERVATION DIVISION

RECEIVED
 NOV 20 2007
 Form C-1
 October 2007
 Form must be Typed
 Form must be Signed
 All blanks must be Filled

NOTICE OF INTENT TO DRILL

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

Expected Spud Date: November 26, 2007
 month day year

OPERATOR: License# 33221
 Name: Roxanna Pipeline, Inc.
 Address 1: 4600 Greenville Ave., Ste. 200
 Address 2: _____
 City: Dallas State: TX Zip: 75206
 Contact Person: Carol Shiels
 Phone: 214-691-6216

CONTRACTOR: License# 33072
 Name: Well Refined Drilling Company, Inc.

Well Drilled For:	Well Class:	Type Equipment:
<input checked="" type="checkbox"/> Oil	<input type="checkbox"/> Enh Rec	<input checked="" type="checkbox"/> Infield
<input checked="" type="checkbox"/> Gas	<input type="checkbox"/> Storage	<input type="checkbox"/> Mud Rotary
<input type="checkbox"/> Seismic ; _____ # of Holes	<input type="checkbox"/> Disposal	<input checked="" type="checkbox"/> Air Rotary
<input type="checkbox"/> Other: _____	<input type="checkbox"/> Wildcat	<input type="checkbox"/> Cable
	<input type="checkbox"/> Other	

If OWWO: old well information as follows:

Operator: _____
 Well Name: _____
 Original Completion Date: _____ Original Total Depth: _____

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

Spot Description: _____
 SW - NE - SE - SE Sec. 21 Twp. 24 S. R. 19 E W
 (or/and) 900 feet from N / S Line of Section
350 feet from E / W Line of Section

Is SECTION: Regular Irregular?
 (Note: Locate well on the Section Plat on reverse side)

County: Allen
 Lease Name: Coltrane Well #: 21-1

Field Name: Iola
 Is this a Prorated / Spaced Field? Yes No

Target Formation(s): Mississippian
 Nearest Lease or unit boundary line (in footage): 350

Ground Surface Elevation: 1028 feet MSL
 Water well within one-quarter mile: Yes No

Public water supply well within one mile: Yes No
 Depth to bottom of fresh water: 100

Depth to bottom of usable water: 200
 Surface Pipe by Alternate: I II

Length of Surface Pipe Planned to be set: 20
 Length of Conductor Pipe (if any): _____

Projected Total Depth: 1100
 Formation at Total Depth: Mississippian

Water Source for Drilling Operations:
 Well Farm Pond Other: city water

DWR Permit #: _____
 (Note: Apply for Permit with DWR)

Will Cores be taken? Yes No
 If Yes, proposed zone: _____

AFFIDAVIT

The undersigned hereby affirms that the drilling, completion and eventual plugging of this well will comply with K.S.A. 55 et. seq.
 It is agreed that the following minimum requirements will be met:

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; in all cases surface pipe **shall be set** through all unconsolidated materials plus a minimum of 20 feet into the underlying formation.
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 from below any usable water to surface within **120 DAYS** of spud date. Or pursuant to Appendix "B" - Eastern Kansas surface casing order #133,891-C, which applies to the KCC District 3 area, alternate II cementing must be completed within 30 days of the spud date or the well shall be plugged. **In all cases, NOTIFY district office** prior to any cementing.

I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date: 11/16/07 Signature of Operator or Agent: Mari Beards Title: Geological Asst

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 (within 60 days);
- Obtain written approval before disposing or injecting salt water.
- If this permit has expired (See: authorized expiration date) please check the box below and return to the address below.

Well Not Drilled - Permit Expired Date: _____
 Signature of Operator or Agent: _____

For KCC Use ONLY
 API # 15 - 001-29676-00-00
 Conductor pipe required None feet
 Minimum surface pipe required 20 feet per ALT. I II
 Approved by: SB 11-21-07
 This authorization expires: 11-21-08
 (This authorization void if drilling not started within 12 months of approval date.)
 Spud date: _____ Agent: _____

21
24
19
 E
 W

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

RECEIVED
KANSAS CORPORATION COMMISSION

Form CDP-1
April 2004

Form must be Typed

APPLICATION FOR SURFACE PIT

NOV 20 2007

Submit in Duplicate

CONSERVATION DIVISION
WICHITA, KS

Operator Name: Roxanna Pipeline, Inc.		License Number: 33221	
Operator Address: 4600 Greenville Ave., Ste. 200		Dallas TX 75206	
Contact Person: Carol Shiels		Phone Number: 214-691-6216	
Lease Name & Well No.: Coltrane 21-1		Pit Location (QQQQ): <u>SW NE SE SE</u> Sec. <u>21</u> Twp. <u>24</u> R. <u>19</u> <input checked="" type="checkbox"/> East <input type="checkbox"/> West <u>900</u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>350</u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <u>Allen</u> County	
Type of Pit: <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Burn Pit <input type="checkbox"/> Settling Pit <input checked="" type="checkbox"/> Drilling Pit <input type="checkbox"/> Workover Pit <input type="checkbox"/> Haul-Off Pit (If WP Supply API No. or Year Drilled)		Pit is: <input checked="" type="checkbox"/> Proposed <input type="checkbox"/> Existing If Existing, date constructed: _____ Pit capacity: _____ (bbls)	
Is the pit located in a Sensitive Ground Water Area? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Chloride concentration: _____ mg/l <i>(For Emergency Pits and Settling Pits only)</i>	
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? native mud			
Pit dimensions (all but working pits): <u>30</u> Length (feet) <u>15</u> Width (feet) <input type="checkbox"/> N/A: Steel Pits Depth from ground level to deepest point: <u>10</u> (feet) <input type="checkbox"/> No Pit			
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 <u>na</u> feet Depth of water well _____ feet		Depth to shallowest fresh water <u>100</u> feet. Source of information: <input type="checkbox"/> measured <input type="checkbox"/> well owner <input type="checkbox"/> electric log <input 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: <u>native mud</u> Number of working pits to be utilized: <u>1</u> Abandonment procedure: <u>air dry and back fill</u> 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.			
_____ 11/16/07 Date		_____ <i>Marie Dewitz</i> Signature of Applicant or Agent	

15-001-29671-00-00

KCC OFFICE USE ONLY

Steel Pit RFAC RFAS

Date Received: 11/20/07 Permit Number: _____ Permit Date: 11/20/07 Lease Inspection: Yes No

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202