For KCC Use: 3-10-08
Effective Date: 4
District #

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

NOTICE OF INTENT TO DRILL

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

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

Must be approved by r	CCC live (5) days prior to commencing well
Expected Spud Date	08_ SpotEast
month day year	\underline{SE} \underline{SW} \underline{SW} $\underline{Sec. 5}$ $\underline{Twp. 16}$ $\underline{SR. 13}$ \underline{X} West
OPERATOR: License# 30380	feet from N / S Line of Section
Name: Hupfer Operating, Inc.	4290 feet from E / W Line of Section
Address: P.O. Box 216	Is SECTION X Regular Irregular?
City/State/Zip: Hays, KS 67601	(Note: Locate well on the Section Plat on reverse side)
Contact Person: Dennis D. Hupter	
Phone: 785-628-8666	Lease Name: K. Bitter Well #: 1
CONTRACTOR: Licensett 31548	Field Name: Trapp
CONTRACTOR: License# J1546 Discovery Drilling Co.	Inc. Is this a Prorated / Spaced Field?
Name:	Target Information(s): Albuckte
Well Drilled For: Well Class: Type Equipment:	rearest Loads of and boundary.
	Ground Surface Elevation: 1919 teet MSL
	Water well within one-quarter mile:
	Public water supply well within one mile:
	Depth to bottom of fresh water: 280
Seismic;# of Holes Other	Depth to bottom of usable water: 400
Other	Surface Pipe by Afternate: X 1 2
If OWWO: old well information as follows:	Length of Surface Pipe Planned to be set: 450
Operator:	Length of Conductor Pipe required: None
Well Name:	Projected Total Depth: 3400
Original Completion Date:Original Total Depth:	Formation at Total Depth: Arbuckle
	Water Source for Drilling Operations:
Directional, Deviated or Horizontal wellbore?	
If Yes, true vertical depth:	
Bottom Hole Location:	
KCC DKT #:	
	If Yes, proposed zone:RECEIVED
	AFFIDAVIT *(ANSAS CORPORATION COMMISSI
The undersigned hereby affirms that the drilling, completion and e	ventual plugging of this well will comply with K.S.A. 55 et. seq.
It is agreed that the following minimum requirements will be met:	MAR 0 5 2008
1. Notify the appropriate district office prior to spudding of we	II;
2. A copy of the approved notice of intent to drill shall be post	ed on each drilling rig: CONSERVATION DIVISION
The minimum amount of surface pipe as specified below st through all unconsolidated materials plus a minimum of 20 f	nall be set by circulating cement to the top; in all cases surface pipe shall with the underlying formation
through all unconsolidated materials plus a minimum of 20 i	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 6	either plugged or production casing is cemented in;
e If an ALTERNATE II COMPLETION production pipe shall be	e cemented from below any usable water to surface within <i>120 days</i> of spud date.
Or pursuant to Appendix "B" - Eastern Kansas surface casi	ing order #133,891-C, which applies to the KCC District 3 area, alternate II cementing
	well shall be plugged. In all cases, NOTISY district office prior to any cementing.
I hereby certify that the statements made herein are true and to the	he best of my knowledge and peret.
Date: March 4, 08 Signature of Operator or Agent:	Anne Timen Title: President
Date: March 4, 00 Signature of Operator of Agents	Terrange of the terrange of terrange of the terrange of the terrange of the terrange of terrange of terrange o
	ennis D. Hupfer To:
For KCC Use ONLY	- File Drill Pit Application (form CDP-1) with Intent to Drill;
API # 15. 009-25177-0000	- File Completion Form ACO-1 within 120 days of spud date; - File acreage attribution plat according to field proration orders;
Conductor pipe required feet	Notify appropriate district office 48 hours prior to workover or re-entry;
Minimum surface pipe required 420 feet per Alt.	Submit plugging report (CP-4) after plugging is completed;
Approved by: 14-3-5-08	- Obtain written approval before disposing or injecting salt water.
2.650	- If this permit has expired (See: authorized expiration date) please
THIS EUCHOTZECOT EXPITOR.	check the how below and return to the address below
(This authorization void if drilling not started within months of effective	Well Not Drilled - Permit Expired
Spud date: Agent:	Signature of Operator or Agent:
	Date:
	· · · · · · · · · · · · · · · · · · ·

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.

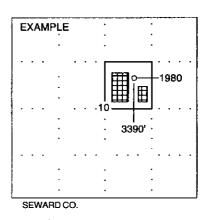
API No. 15 - 009-25177-0000	Location of Well: County:
Operator:	feet from N / S Line of Section feet from E / W Line of Section
Lease:	
Well Number:	
Field:	·
Number of Acres attributable to well:	Is Section: Regular or Irregular
QTR / QTR / QTR of acreage:	If Section is Irregular, locate well from nearest corner boundary. Section corner used: NE NW SE SE

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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 ·	190' FEL
1 336FSL	



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

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: (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: Hupfer Operating, Inc.		License Number: 30380		
Operator Address: P.O. Box 216,	Hays, KS 67	7601		
Contact Person: Dennis D. Hupfer		Phone Number: (785) 628-8666		
Lease Name & Well No.: K. Bitter #1			Pit Location (QQQQ):	
Type of Pit:	Pit is:		SESWSW	
Emergency Pit Workover Pit	X Proposed Existing		Sec. 5 Twp. 16 R. 13 East X West	
Settling Pit X Drilling Pit	If Existing, date constructed:		330 Feet from North / X South Line of Section	
Burn Pit Haul-Off Pit			4290 Feet from X East / West Line of Section	
(If WP Supply API No. or Year Drilled)	Pit capacity: 800	/hhla\	Barton County	
		(bbls)	Chloride concentration: mg/l	
Is the pit located in a Sensitive Ground Water Area? Yes X No		(For Emergency Pits and Settling Pits only)		
Is the bottom below ground level? Artificial Liner?			How is the pit lined if a plastic liner is not used?	
X Yes No	Yes XN		Clay sides & bottom	
Pit dimensions (all but working pits):				
Depth f	rom ground level to dee			
If the pit is lined give a brief description of the liner material, thickness and installation procedure.		Describe proce liner integrity, i	edures for periodic maintenance and determining ncluding any special monitoring.	
		Let dry natural		
Distance to nearest water well within one-mile of pit		Depth to shallowest fresh water 85 feet.		
960 feet Depth of water well 140 feet		Source of information: measured X well owner electric log KDWR		
Emergency, Settling and Burn Pits ONLY			over and Haul-Off Pits ONLY:	
Producing Formation: Number of producing wells on lease:		Type of material utilized in drilling/workover: Fresh water Mud Number of working pits to be utilized:3		
				Barrels of fluid produced dally:
Does the slope from the tank battery allow all spilled fluids to flow into the pit? Yes No		Drill pits must be closed within 365 days of spud date. RECEI		
I hereby certify that the above state	ements are true and g	orrect to the bes	t of my knowledge and belief.	
Thereby destiny that the above our		1/6	//// MAR 0!	
March 4, 2008	Neun	WX	tyn Med Sommervation	
Date	Dennis D.	. Hupfer	Signature of Applicant or Agent	
	KCCC	OFFICE USE O	NLY	
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Date Received: 3/5 (08 Permit Nur	nber:	Perm	nit Date: 3/5/0% Lease Inspection: Yes No	