

For KCC Use: 4-8-08
 Effective Date: 4-8-08
 District # 3
 SGA? Yes No

KANSAS CORPORATION COMMISSION
 OIL & GAS CONSERVATION DIVISION

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: March 20, 2008
month day year

OPERATOR: License# 33927
 Name: Mega West Kansas Energy Corp
 Address 1: PO Box 149
 Address 2: _____
 City: Chetopa State: KS Zip: 67336
 Contact Person: Rick Richelhoff
 Phone: (403) 971-0800

CONTRACTOR: License# 33803
 Name: Mitchell Drilling

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

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: _____
 (a/a/a/a) SW NE NE Sec. 10 Twp. 35 S. R. 21 E W
775 feet from N / S Line of Section
1,100 feet from E / W Line of Section
 Is SECTION: Regular Irregular?

(Note: Locate well on the Section Plat on reverse side)
 County: Labette
 Lease Name: Barr Well #: Barr MW 2
 Field Name: Chetopa
 Is this a Prorated / Spaced Field? Yes No
 Target Formation(s): Bartlesville
 Nearest Lease or unit boundary line (in footage): 675
 Ground Surface Elevation: 827 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: 200-50
 Depth to bottom of usable water: 300-100
 Surface Pipe by Alternate: I II
 Length of Surface Pipe Planned to be set: 20
 Length of Conductor Pipe (if any): 20
 Projected Total Depth: 140
 Formation at Total Depth: Bartlesville
 Water Source for Drilling Operations: Well Farm Pond Other: None - air rotary
 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: February 25, 2008 Signature of Operator or Agent: [Signature] Title: Production Technologist

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 FEB 27 2008
 CONSERVATION DIVISION
 WICHITA, KS

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 APR 2 2008
 CONSERVATION DIVISION
 WICHITA, KS

For KCC Use ONLY
 API # 15 - 099-24345-0000
 Conductor pipe required None feet
 Minimum surface pipe required 20 feet per ALT. I II
 Approved by: [Signature]
 This authorization expires: 4-3-09
 (This authorization void if drilling not started within 12 months of approval date.)
 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 (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: _____

10
 35
 21
 E
 W

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 - 099-24345-0000

Operator: Mega West Kansas Energy Corp

Lease: Barr

Well Number: Barr MW 2

Field: Chetopa

Number of Acres attributable to well: 0.5

QTR/QTR/QTR/QTR of acreage: _____ - SW - NE - NE

Location of Well: County: Labette

775 feet from N / S Line of Section

1,100 feet from E / W Line of Section

Sec. 10 Twp. 35 S. R. 21 E W

Is Section: Regular or Irregular

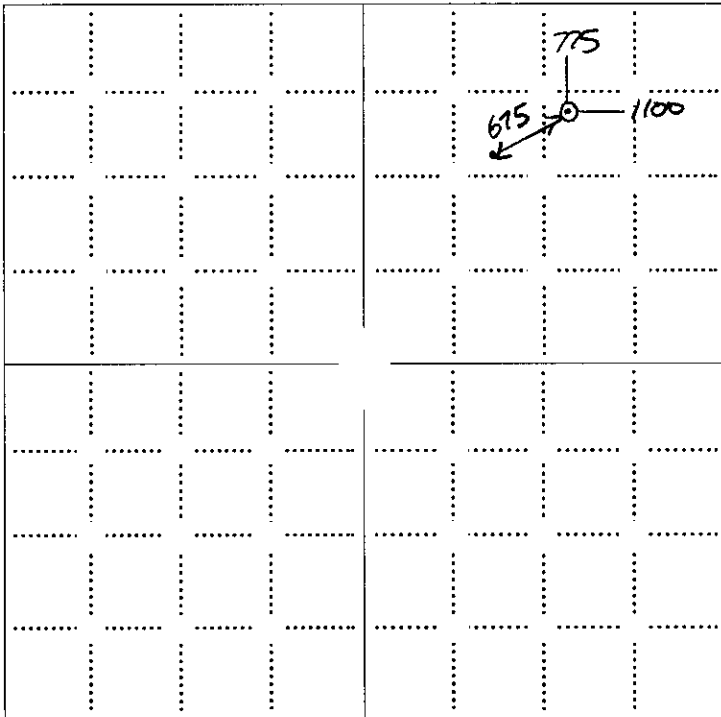
If Section Is Irregular, locate well from nearest corner boundary.

Section corner used: NE NW SE SW

PLAT

(Show location of the well and shade acreage for prorated or spaced wells.)

(Show footage to the nearest lease or unit boundary line.)



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

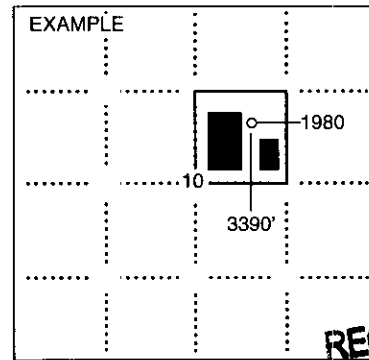
In plotting the proposed location of the well, you must show:

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 south / north and east / west outside section lines.
3. The distance to the nearest lease or unit boundary line (in footage).
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).

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FEB 27 2008

CONSERVATION DIVISION
WICHITA, KS



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MAR 10 2008

KCC WICHITA

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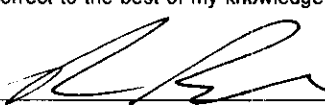
APR 02 2008

CONSERVATION DIVISION
WICHITA, KS

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

Form CDP-1
April 2004
Form must be Typed

Submit in Duplicate

Operator Name: MegaWest Energy Kansas Corp		License Number: 33927
Operator Address: PO Box 149 Chetopa, KS 67336		
Contact Person: Rick Richelhoff		Phone Number: (403) 971-0800
Lease Name & Well No.: Barr MW 2		Pit Location (QQQQ): _____ SW _____ NE _____ NE
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 <small>(If WP Supply API No. or Year Drilled)</small>	Pit is: <input checked="" type="checkbox"/> Proposed <input type="checkbox"/> Existing If Existing, date constructed: _____ Pit capacity: 0 (bbls)	Sec. 10 Twp. 35 R. 21 <input checked="" type="checkbox"/> East <input type="checkbox"/> West 775 Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section 1,100 Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section Labette 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 type="checkbox"/> Yes <input checked="" 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?
Pit dimensions (all but working pits): _____ Length (feet) _____ Width (feet) _____ N/A: Steel Pits Depth from ground level to deepest point: _____ (feet) <input checked="" 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. No pit will be constructed or needed for air rotary drill rig.
Distance to nearest water well within one-mile of pit N/A feet Depth of water well _____ feet	Depth to shallowest fresh water 200 feet. Source of information: <input type="checkbox"/> measured <input type="checkbox"/> well owner <input checked="" 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: Water, Cement Number of working pits to be utilized: 0 Abandonment procedure: No pit will be used with air rotary drill rig. 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.		
March 20, 2008 Date	 Signature of Applicant or Agent	RECEIVED KANSAS CORPORATION COMMISSION APR 02 2008 CONSERVATION DIVISION WICHITA, KS
KCC OFFICE USE ONLY		
Date Received: 4/2/08 Permit Number: _____ Permit Date: 4/2/08 Lease Inspection: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Steel Pit <input type="checkbox"/> RFAC <input type="checkbox"/> RFAS <input type="checkbox"/> No PIT	

15-099-24345-0000