

CARD MUST BE TYPED

# NOTICE OF INTENTION TO DRILL

State of Kansas  
(see rules on reverse side)

CARD MUST BE SIGNED

Starting Date: 11 03 84  
month day year

API Number 15- 163-22,548-00-00

OPERATOR: License # 6033

SW NW NE Sec 4 Twp 9 S, Rge 20  East  West

Name: Murfin Drilling Company

Address: 250 N. Waterway Suite 300

City/State/Zip: Wichita, KS 67202

Contact Person: David L. Murfin

Phone: 316-267-3241

CONTRACTOR: License # 6033

Name: Murfin Drilling Company

City/State: Wichita, KS

<b>Well Drilled For:</b>	<b>Well Class:</b>	<b>Type Equipment:</b>
<input checked="" type="checkbox"/> Oil	<input type="checkbox"/> Infield	<input checked="" type="checkbox"/> Mud Rotary
<input type="checkbox"/> Gas	<input type="checkbox"/> Pool Ext.	<input type="checkbox"/> Air Rotary
<input type="checkbox"/> OWWO	<input checked="" type="checkbox"/> Wildcat	<input type="checkbox"/> Cable
<input type="checkbox"/> Expl		

If OWWO: old well info as follows:

Operator .....

Well Name .....

Comp Date ..... Old Total Depth .....

Projected Total Depth 3600 ..... feet

Projected Formation at TD ..... Arbuckle

Expected Producing Formations ..... Arbuckle

4290 ..... Ft North from Southeast Corner of Section

2310 ..... Ft West from Southeast Corner of Section

(Note: Locate well on Section Plat on reverse side)

Nearest lease or unit boundary line 990 ..... feet.

County Rooks

Lease Name Whisman Well# 1

Domestic well within 330 feet:  yes  no

Municipal well within one mile:  yes  no

Depth to Bottom of fresh water 200 ..... feet

Lowest usable water formation Dakota

Depth to Bottom of usable water 900 ..... feet

Surface pipe by Alternate: 1  2  250

Surface pipe to be set ..... feet

Conductor pipe if any required N/A ..... feet

Ground surface elevation ..... feet MSL

This Authorization Expires 5-3-89

Approved By 11-2-84

I certify that we will comply with K.S.A. 55-101, et seq., plus eventually plugging hole to K.C.C. specifications.

Date 11-2-84 Signature of Operator or Agent

*James R. Daniels*  
James R. Daniels, Agent for Operator

Title General Manager

*MHC/WOHE 11/2/84*

Must be filed with the K.C.C. five (5) days prior to commencing well  
 This card void if drilling not started within six (6) months of date received by K.C.C.

11-2-84

Important procedures to follow:

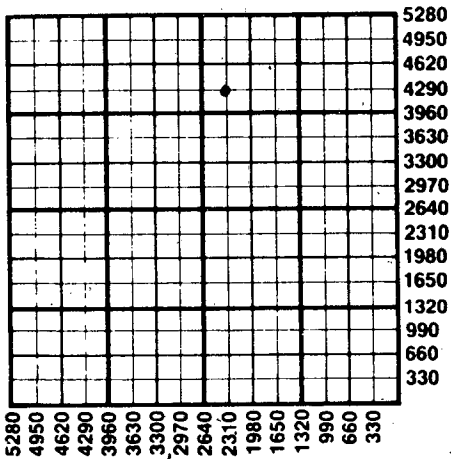
1. Notify District office before setting surface casing.
2. Set surface casing by circulating cement to the top of the casing.
3. File completion forms ACO-1 with K.C.C. within 90 days of well completion, following instructions on ACO-1, side F, and including copies of wireline logs.
4. Notify District office 48 hours prior to old well workover or re-entry.
5. Prior to plugging, prepare a plugging plan, then obtain agreement from the appropriate district office for an approved plugging plan.
6. Submit plugging report (CP-4) to K.C.C. after plugging is completed.
7. Obtain an approved injection docket number before disposing of salt water.
8. Notify K.C.C. within 10 days when injection commences or terminates.
9. If an alternate 2 completion, cement in the production pipe from below any usable water to surface within 120 days of spud date.

NOV 02 1984

RECEIVED  
 STATE CORPORATION COMMISSION

STATE CORPORATION COMMISSION  
 WICHITA, KANSAS

A Regular Section of Land  
 1 Mile = 5,280 Ft.



State Corporation Commission of Kansas  
 Conservation Division  
 200 Colorado Derby Building  
 Wichita, Kansas 67202  
 (316) 263-3238