

CARD MUST BE TYPED

State of Kansas  
**NOTICE OF INTENTION TO DRILL**  
(see rules on reverse side)

CARD MUST BE SIGNED

Starting Date: 8 ..... 6 ..... 1984 .....  
month day year

API Number 15- 037-2122-0000

OPERATOR: License # 6086

SE/4 ..... Sec 2 ..... Twp 28 S, Rge 23 .....  
(location)  East  West

Name The Production Team, Inc.

Address Box 785

City/State/Zip Independence, KS 67301

Contact Person Alex Davies

Phone 316 331 2951

1980 ..... Ft North from Southeast Corner of Section

1980 ..... Ft West from Southeast Corner of Section

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

CONTRACTOR: License # 5493

Name Pat Chase

City/State Chanute, KS 666720

Nearest lease or unit boundary line 660 ..... feet.

County Crawford

Lease Name Mitchell Well# 25

Domestic well within 330 feet:  yes  no

Municipal well within one mile:  yes  no

Well Drilled For: Well Class: Type Equipment:

- Oil  Swd  Infield  Mud Rotary
- Gas  Inj  Pool Ext.  Air Rotary
- OWWO  Expl  Wildcat  Cable

If OWWO: old well info as follows:

Operator .....

Well Name .....

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

Projected Total Depth 200 ..... feet

Projected Formation at TD Peru .....

Expected Producing Formations .....

Depth to Bottom of fresh water 20 ..... feet

Lowest usable water formation .....

Depth to Bottom of usable water 100 ..... feet

Surface pipe by Alternate: 1

Surface pipe to be set 20 ..... feet

Conductor pipe if any required ..... feet

Ground surface elevation ..... feet MSL

This Authorization Expires 2-3-85

Approved By 5-3-84 

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

Date 8-3-84 ..... Signature of Operator or Agent Miranda Moorhead Title As Agent

MHC/MOHE 8/3/84

