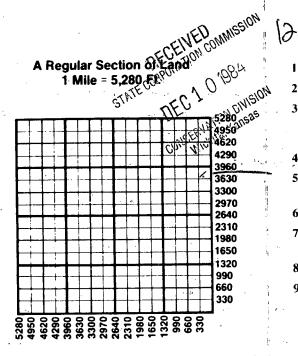
NOTICE OF INTENTION TO DRILL (see rules on reverse side)

CARD MUST BE SIGNED

| Starting Date: 12 14 84 | API Number 15- 00/- 27, 168-00-00 |
|---|--|
| month day year | X East |
| OPERATOR: License # 5150 | NE SE. NE Sec. 21. Twp. 23. S, Rge. 18. West |
| Name Mack C. Colt, Inc. | (location) |
| Address P.O. BOX 388 | 3680 Ft North from Southeast Corner of Section |
| City/State/Zip IOla. KS .66749 | 200 Ft West from Southeast Corner of Section |
| Contact Person Dennis Kershner | (Note: Locate well on Section Plat on reverse side) |
| Phone 316-365-3111 | Nearest lease or unit boundary line1600 feet. |
| CONTRACTOR: License #5150' | County Allen |
| CONTRACTOR: License # 5150' Name Company tooks | Lease Name IOOF (CBSU) Well# 17A0 |
| City/State | Domestic well within 330 feet: ☐ yes ☐ no |
| Well Drilled For: Well Class: Type Equipment: | Municipal well within one mile : yes no |
| | , - - |
| ☐ Gas ☐ Inj ☐ Pool Ext. ☐ Air Rotary | Depth to Bottom of fresh water unknown feet |
| OWWO Expl Wildcat, Cable | Lowest usable water formation . W.yandof.ta Lunknown |
| If OWWO: old weil info as follows: | Depth to Bottom of usable water |
| Operator | Surface pipe by Alternate: 1 2 1 |
| Well Name | Surface pipe to be set |
| Comp Date Old Total Depth | Conductor pipe if any required |
| Projected Total Depth | Ground surface elevation |
| Projected Formation at TD | This Authorization Expires 6. 20.35 6-10-85 |
| Expected Producing Formations | Approved By |
| I certify that we will comply with K.S.A. 55-101, et seq., plus eventually plugging | hole to K.C.C. specifications. |
| Date 12.7-84. Signature of Operator or Agent Semmi | Lesson Title PH |
| | mHC/UPHE 12/10 AV |

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.



12-10-84

Important procedures to follow:

- 1. Notify District office before setting surface casing.
- 2. Set surface casing by circulating cement to the top.
- 3. File completion forms ACO-1 with K.C.C. within 90 days of well completion, following instructions on ACO-1, side 1, 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.
- 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.

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