

Form must be Typed
Form must be Signed
All blanks must be Filled

For KCC Use:

Effective Date: 6-9-08
District # 1
SGA? Yes No

NOTICE OF INTENT TO DRILL

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

Expected Spud Date 07 month 20 day 2008 year

Spot SW NE NE Sec 30 Twp 23 S. R 36 East West

OPERATOR: License # 5952
Name: BP AMERICA PRODUCTION COMPANY
Address: P. O. BOX 3092, RM 6.121, WL-1
City/State/Zip: HOUSTON, TX 77253-3092
Contact Person: DEANN SMYERS
Phone: (281)366-4395

1250 feet from N / S Line of Section
1250 feet from E / W Line of Section

Is SECTION Regular Irregular?

(Note: Locate well on Section Plat on Reverse Side)

CONTRACTOR: License #: 33784
Name: Trinidad Drilling, LP

County: Kearny
Lease Name: Stallman B Well #: 4

Field Name: Hugoton
Is this a Prorated/Spaced Field? Yes No

Target Formation(s): Chase
Nearest Lease or unit boundary: 1250

Ground Surface Elevation: 3243.36 feet MSL
Water well within one-quarter mile: yes no

Public water supply within one mile: yes no
Depth to bottom of fresh water: 320

Depth to bottom of usable water: 840
Surface Pipe by Alternate: 1 2

Length of Surface Pipe Planned to be set: 800 min.
Length of Conductor pipe required: -

Projected Total Depth: 3060
Formation at Total Depth: Council Grove

Water Source for Drilling Operations:
Well Farm Pond Other

DWR Permit #: will apply if needed
(Note: Apply for Permit with DWR)

Will Cores Be Taken?: Yes No
If yes, proposed zone: -

Well Drilled For: Well Class: Type Equipment:

Oil Enh Rec Infield Mud Rotary
 Gas Storage Pool Ext. Air Rotary
 OWWO Disposal Wildcat Cable
 Seismic; # of Holes Other

If OWWO: old well information as follows:

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 # 08-CONS-162-CWLE

AFFIDAVIT

RECEIVED

The undersigned hereby affirms that the drilling, completion and eventual plugging of this well will comply with K.S.A. 55- 101 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 to the best of my knowledge and belief.

Date: 6/03/2008 Signature of Operator or Agent: Deanna Smyers Title: REGULATORY STAFF ASSIST.

For KCC Use ONLY
API # 15- 093-21830-0000
Conductor pipe required None feet
Minimum surface pipe required 800 feet per Alt 1
Approved by: RMS 6-4-08
This authorization expires: 6-4-09
(This authorization void if drilling not started within 6 months of effective 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;
- Obtain written approval before disposing or injecting salt water.
- If permit has expired (See: authorized expiration date) please check the box below and return to the address below
 Well Not Drilled - Permit Expired
Signature of Operator or Agent: _____
Date: _____

30-23-36W

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 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- 093-21830-0000
Operator BP AMERICA PRODUCTION COMPANY
Lease Stallman B
Well Number 4
Field _____

Location of Well: County: _____
_____ feet from N / S Line of Section
_____ feet from E / W Line of Section
Sec _____ Twp _____ S. R _____ East West

Number of Acres attributable to well: 640

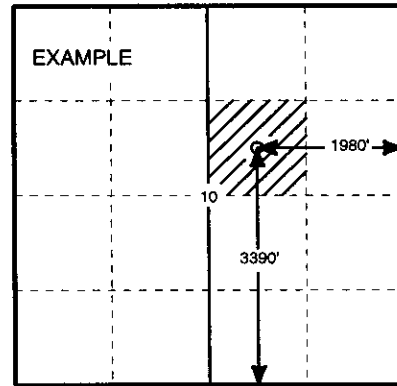
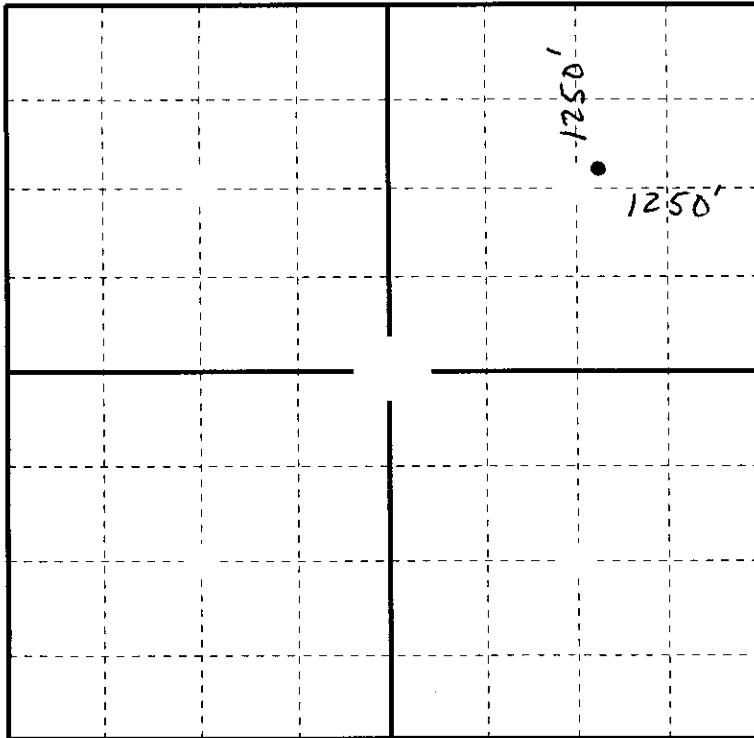
Is Section Regular or _____ Irregular

QTR/QTR/QTR of acreage: _____ - _____ - _____

If Section is Irregular, locate well from nearest corner boundary.
Section corner used: _____ NE _____ NW _____ SE _____ SW

PLAT

(Show location of the well and shade attributable acreage for prorated or spaced wells.)
(Show footage to nearest lease or unit boundary line)



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; and 3.
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: (CO-7 for oil wells; CG-8 for gas wells).

PLAT AND CERTIFICATION OF ACREAGE ATTRIBUTABLE TO A GAS WELL

Kansas Corporation Commission, Conservation Division
Finney State Office Building, 130 South Market, Room 2078
Wichita, Kansas 67202

08-CONS-162 CWLE

API NUMBER 15- 093-21830-0000

OPERATOR BP AMERICA PRODUCTION COMPANY

LEASE STALLMAN B

WELL NUMBER 4

FIELD HUGOTON / CHASE

LOCATION OF WELL: COUNTY KEARNY

1250 ENL feet from south/north line of section

1250 EEL feet from east / west line of section

SECTION 30 TWP 23S (s) RG 36W E/W

IS SECTION X REGULAR or _____ IRREGULAR

IF SECTION IS IRREGULAR, LOCATE WELL FROM

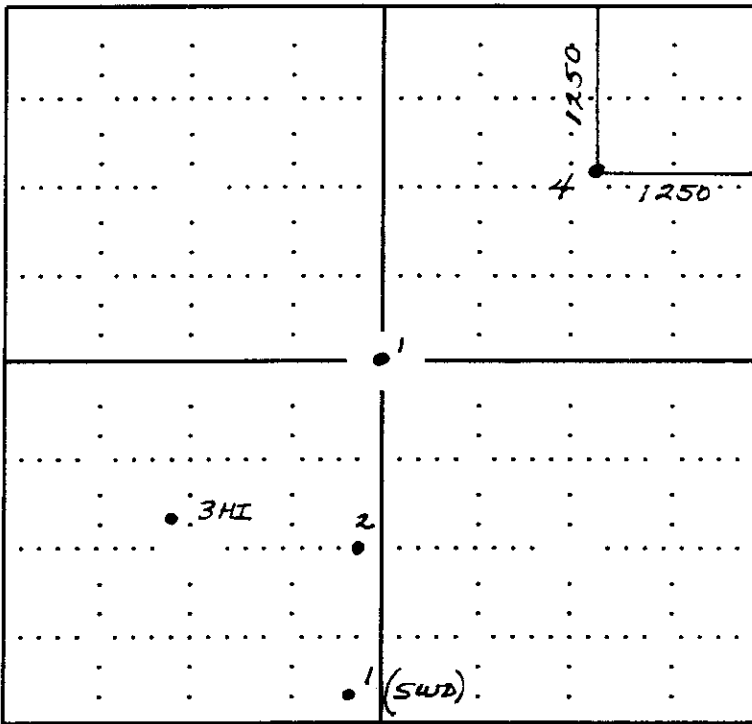
NEAREST CORNER BOUNDARY. (check line below)

Section corner used: NE NW SE SW

NUMBER OF ACRES ATTRIBUTABLE TO WELL 624.5

QTR/QTR/QTR OF ACREAGE SW - NE - NE

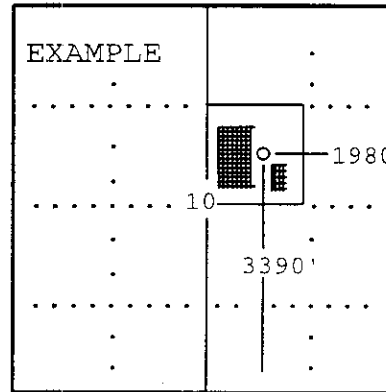
(Show the location of the well and shade attributable acreage for prorated or spaced wells).
(Show the footage to the nearest lease or unit boundary line; and show footage to the nearest common source supply well).



RECEIVED
KANSAS CORPORATION COMMISSION

JUN 04 2008

CONSERVATION DIVISION
WICHITA, KS



SEWARD CO.

The undersigned hereby certifies as REGULATORY STAFF ASSISTANT (title) for

BP AMERICA PRODUCTION COMPANY

(Co.), a duly authorized agent, that all

information shown hereon is true and correct to the best of my knowledge and belief, that all acreage claimed attributable to the well named herein is held by production from that well and hereby make application for an allowable to be assigned to the well upon the filing of this form and the State test, whichever is later.

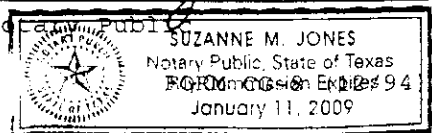
Signature [Signature]

Subscribed and sworn to before me on this 5 day of March, 20 08

[Signature]
Notary Public

My Commission expires

1-11-2009



APPLICATION FOR SURFACE PIT

Submit in Duplicate

Operator Name: BP America Production Company		License Number: 5952
Operator Address: P. O. Box 3092, Houston, TX 77253-3092, Room 6.121, WL-1		
Contact Person: DeAnn Smyers		Phone Number: (281) 366-4395
Lease Name & Well No.: Stallman B Well No. 4		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 _____ 3500 (bbls)	Sec. 30 Twp. 23 R. 36 <input type="checkbox"/> East <input checked="" type="checkbox"/> West _____ Feet from <input checked="" type="checkbox"/> North/ <input type="checkbox"/> South Line of Section _____ Feet from <input checked="" type="checkbox"/> East/ <input type="checkbox"/> West Line of Section _____ Kearny 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Artificial Liner? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	How is pit lined if a plastic liner is not used? Sealed with Bentonite from drilling fluid
Pit dimensions (all but working pits): 75 Length (feet) 75 Width (feet) _____ N/A Steel Pits Depth from ground level to deepest point 4 (feet)		
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. <div style="text-align: right;">RECEIVED KANSAS CORPORATION COMMISSION JUN 04 2008 CONSERVATION DIVISION WICHITA, KS</div>
Distance to nearest water well within one-mile of pit N/A feet Depth of water well 315 feet	Depth to shallowest fresh water 215 feet. Source of information: _____ measured _____ well owner _____ electric log 3 KDWR	15-093-21830-0000
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 pond? <input type="checkbox"/> Yes <input type="checkbox"/> No	Drilling, Workover and Haul-Off Pits ONLY: Type of material utilized in drilling/workover Bentonite Number of working pits to be utilized 0 Abandonment procedure: Evaporate & Backfill 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. <div style="display: flex; justify-content: space-between;"> <div style="text-align: center;"> <u>6/03/2008</u> Date </div> <div style="text-align: center;"> Signature of Applicant or Agent </div> </div>		
KCC OFFICE USE ONLY		
Date Received: <u>6/4/08</u> Permit Number: _____ Permit Date: <u>6/4/08</u> Lease Inspection: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		