

CARD MUST BE TYPED


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

CARD MUST BE SIGNED

Starting Date: .....12/1/85.....  
month day year

API Number 15- 065-22,261-00-00

OPERATOR: License # .....5692.....

 NW Sec 17. Twp ... 9 S, Rge 21.  East  West  
(location)

Name FINA OIL & CHEMICAL COMPANY.....

Address ...1601 N.W. Expressway, Ste. 900.....

City/State/Zip ...Oklahoma City, OK 73118.....

Contact Person ..Dave Roddy.....

Phone ... (405) 840-0671.....

.....1650..... Ft North from Southeast Corner of Section

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

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

CONTRACTOR: License # .....Unknown.....

Name .....

City/State .....

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

County .....Graham.....

Lease Name ..COOLEY A..... Well# .....14.....

Domestic well within 330 feet :  yes  no

Municipal well within one mile :  yes  no

Well Drilled For: Well Class: Type Equipment:

- |   |                               |   |  |
|---|-------------------------------|---|--|
| <input checked="" type="checkbox"/> Oil | <input type="checkbox"/> Swd  | <input checked="" type="checkbox"/> Infield | <input checked="" type="checkbox"/> Mud Rotary |
| <input type="checkbox"/> Gas            | <input type="checkbox"/> Inj  | <input type="checkbox"/> Pool Ext.          | <input type="checkbox"/> Air Rotary            |
| <input type="checkbox"/> OWWO           | <input type="checkbox"/> Expl | <input type="checkbox"/> Wildcat            | <input type="checkbox"/> Cable                 |

If OWWO: old well info as follows:

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

Lowest usable water formation .....

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


Surface pipe by Alternate : 1  2

Surface pipe to be set .....250..... feet

Conductor pipe if any required .....

Ground surface elevation .....2310..... feet MSL

This Authorization Expires .....4-30-86.....

Approved By .....10-30-85..... 

Operator .....

Well Name .....

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

Projected Total Depth .....3840..... feet

Projected Formation at TD .....Arbuckle.....

Expected Producing Formations .....Arbuckle.....

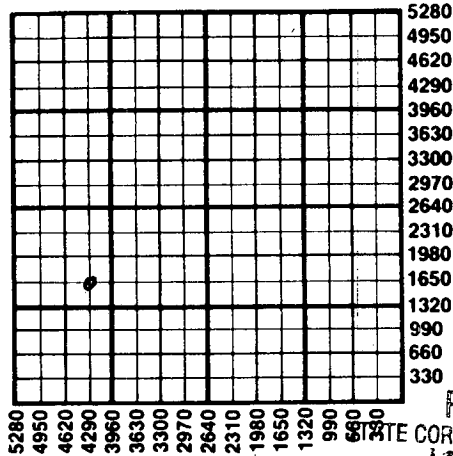
I certify that we will comply with K.S.A. 55-101, et seq., plus eventually plugging hole to K.C.C. specifications.

Date ..10/29/85..... Signature of Operator or Agent  Title .....Engineer.....

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.

**Important procedures to follow :**

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



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.
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.

RECEIVED

CORPORATION COMMISSION

10/30/85  
OCT 30 1985

State Corporation Commission of Kansas

Conservation Division

200 Colorado Derby Building

Wichita, Kansas 67202

(316) 263-3238

CONSERVATION DIVISION

Wichita, Kansas