

CARD MUST BE TYPED

State of Kansas

CARD MUST BE SIGNED

# NOTICE OF INTENTION TO DRILL

(see rules on reverse side)

Starting Date ..... 9/15/86 .....  
month day year

API Number 15— 099-22,503-00200 ✓  
\_\_\_\_\_ East

OPERATOR: License # 4469  
Name Kelt Energy, Inc.  
Address 900 College Street  
City/State/Zip Independence, Kansas 67301  
Contact Person Bob Blythe  
Phone (316) 331-0207

App. NW NE SE Sec. 25 Twp. 32 S, Rg. 17 \_\_\_\_\_ West  
2020 Ft. from South Line of Section  
1155 Ft. from East Line of Section

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

CONTRACTOR: License # 9350  
Name Thompson Drilling Co., Inc.  
City/State Box 605, Independence, KS 67301

Nearest lease or unit boundary line 640 feet  
County Labette  
Lease Name Meyers Well # KCPM-2

Well Drilled For: Well Class: Type Equipment:  
 Oil \_\_\_\_\_ SWD \_\_\_\_\_ Infield  Mud Rotary  
\_\_\_\_\_ Gas \_\_\_\_\_ Inj  Pool Ext. \_\_\_\_\_ Air Rotary  
\_\_\_\_\_ OWWO \_\_\_\_\_ Expl \_\_\_\_\_ Wildcat \_\_\_\_\_ Cable

Ground surface elevation n/a feet MSL  
Domestic well within 330 feet: \_\_\_\_\_ yes  no  
Municipal well within one mile: \_\_\_\_\_ yes  no

If OWWO: old well info as follows:  
Operator .....  
Well Name .....  
Comp Date ..... Old Total Depth.....

Depth to bottom of fresh water. 50  
Depth to bottom of usable water 200  
Surface pipe by Alternate: 1 \_\_\_\_\_ 2   
Surface pipe planned to be set 20  
Conductor pipe required n/a  
Projected Total Depth 800 feet  
Formation Bartlesville

I certify that well will comply with K.S.A. 55-101, et seq., plus eventually plugging hole to KCC specifications.  
Date 9/11/86 Signature of Operator or Agent Elaine Barton Title As Agent

For KCC Use:  
Conductor Pipe Required ..... feet; Minimum Surface Pipe Required ..... feet per Alt. 20  
This Authorization Expires 3-11-87 Approved By 9-11-86

*Ret/ke*

