

CARD MUST BE TYPED

State of Kansas  
**NOTICE OF INTENTION TO DRILL**

(see rules on reverse side)

CARD MUST BE SIGNED

Starting Date: ..... 7 ..... 17 ..... 85 .....  
month day year

**OPERATOR:** License # 5499  
Name Brecheisen Oil Company  
Address Box 40  
City/State/Zip Garnett, KS 66032  
Contact Person Jim Lorenz  
Phone (316) 421-6906

**CONTRACTOR:** License # 5782  
Name VW&B Drilling Company R.1  
City/State Box 128A Altamont, KS 67330

<b>Well Drilled For:</b>	<b>Well Class:</b>	<b>Type Equipment:</b>
<input checked="" type="checkbox"/> Oil	<input type="checkbox"/> Swd	<input type="checkbox"/> Mud Rotary
<input checked="" type="checkbox"/> Gas	<input type="checkbox"/> Inj	<input checked="" type="checkbox"/> Air Rotary
<input type="checkbox"/> OWWO	<input type="checkbox"/> Expl	<input type="checkbox"/> Cable
	<input type="checkbox"/> Wildcat	

If OWWO: old well info as follows:  
Operator .....  
Well Name .....  
Comp Date ..... Old Total Depth .....  
Projected Total Depth 950 ..... feet  
Projected Formation at TD Mississippian .....  
Expected Producing Formations .....

API Number 15- 099-22,348-00-00  
C S/E S/E NE

app. C. S. / S. E. Sec. NE. 24 Twp. 32 S. Rge. 18  
(location)  East  West

2970 Ft North from Southeast Corner of Section  
1320 Ft West from Southeast Corner of Section  
(Note: Locate well on Section Plat on reverse side)

Nearest lease or unit boundary line ..... 330 ..... feet.  
County Labette  
Lease Name Butts Well# 2-P-85

Domestic well within 330 feet:  yes  no  
Municipal well within one mile:  yes  no

Depth to Bottom of fresh water ..... 75 ..... feet  
Lowest usable water formation .....  
Depth to Bottom of usable water ..... 150 ..... feet  
Surface pipe by Alternate: 1  2   
Surface pipe to be set ..... feet  
Conductor pipe if any required ..... feet  
Ground surface elevation ..... feet MSL.  
This Authorization Expires 1-17-86  
Approved By 7-17-85 [Signature]

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

Date 7/17/85 Signature of Operator or Agent Susan Arnold Title As Agent

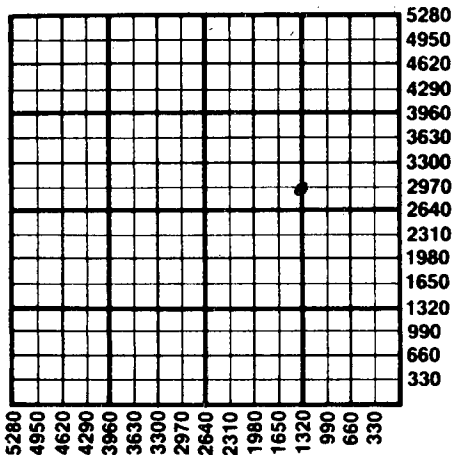
Must be filed with the K.C.C. five (5) days prior to commencing well  
This card void if drilling not started within six (6) months of date received by K.C.C.

JUL 17 1985

CONSERVATION DIVISION  
Wichita, Kansas

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

7-17-85



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.
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.

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