

CARD MUST BE TYPED

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

CARD MUST BE SIGNED

Starting Date: 8 17 1984
month day year

API Number 15- 037-21,233-0000

OPERATOR: License # 6086.....

..NW./4... Sec .23. Twp .29. S, Rge .21. East West
(Location)

Name ...The Production Team, Inc.....

Address Box 785.....

City/State/Zip Independence, KS 67301.....

Contact Person Alex Davies.....

Phone 316 331 2951.....

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

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

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

CONTRACTOR: License # 5493.....

Nearest lease or unit boundary line 660..... feet.

County Crawford.....

Lease Name Diskin..... Well# 28.....

Domestic well within 330 feet: yes no

Municipal well within one mile: yes no

Name Pat Chase.....

City/State Chanute, KS 666720.....

Well Drilled For: Well Class: Type Equipment:

Oil Swd Infield Mud Rotary

Gas Inj Pool Ext. Air Rotary

OWWO Expl Wildcat Cable

Depth to Bottom of fresh water 2.0..... feet

Lowest usable water formation

Depth to Bottom of usable water 1.00..... feet

Surface pipe by Alternate: 1 2

Surface pipe to be set 2.0..... feet

Conductor pipe if any required

Ground surface elevation 922..... feet MSL

This Authorization Expires 2-16-85.....

Approved By 8-16-84.....

If OWWO: old well info as follows:

Operator

Well Name

Comp Date Old Total Depth

Projected Total Depth 200..... feet

Projected Formation at TD Peru.....

Expected Producing Formations

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

Date 8-16-84..... Signature of Operator or Agent

Muenda Moorhead Title As Agent

Form C-1 4/84

MHC/KOHE 8/16/84

