5280 4950 4950 3960 3300 3300 2840 2840 2840 1320 4980 990 8660

## State of Kansas NOTICE OF INTENTION TO DRILL

FORM MUST BE SIGNED ALL BLANKS MUST BE FILLED

Must be approved by the K.C.C. five (5) days prior to commencing well

·			East
Expected Spud Date	8	89	Aρ \$/2. Ne. SE sec . 31. Twp 8. s, Rg 17.W West
month	day		
	<b>.</b>	* · · · · · · · · · · · · · · · · · · ·	550 feet from South line of Section
OPERATOR: License # 553	/		teet from East line of Section
Name: Kenny Brown E		(Note: Locate well on Section Plat Below)	
Address: 401 N. Washi			County: Rooks
City/State/Zip:Plain			County:
Contact Person:Mr			Lease Name: Dopita Well #: #14-A
Phone: .913-434-7236.		• • • • • • • • • • • • • • • • • • • •	Field Name: DOPITA
CONTRACTOR: License #:5	202		Is this a Prorated Field? yesx. no
			Target Formation(s):ARB
Name: . Red. Tiger. Dri	11.11.18.W1	• • • • • • • • • • • • • • • • • • • •	Nearest lease or unit boundary:550
Hall Baillad Face	Uall Class. Tu	pe Equipment:	Domestic well within 330 feet: yes x no
Well Drilled For:	Well Class: Ty	pe Equipment.	Municipal well within one mile: yes x no
.x. Oil Inj	.X. Infield	X Mud Rotary	Depth to bottom of fresh water: .100
Gas Storage			Depth to bottom of usable water: 856. 900
OWWO Disposal		. Cable	Surface Pipe by Alternate: 1 x 2
Seismic; # of Holes		· -==,	Length of Surface Pipe Planned to be set: 200!#
			Length of Conductor pipe required: N/A
If OWNO: old well informatio	n as follows:		Projected Total Depth: .3400
Operator:			Formation at Total Depth:ARB
Well Name:			Water Source for Drilling Operations:
Comp. Date: Old Total Depth			well farm pond other
			DWR Permit #: $N/A$ yes $X$
Directional, Deviated or Horizontal wellbore? $\dots$ yes $\overset{X}{\dots}$ no			Will Cores Be Taken?: yes no
If yes, total depth location	:	If yes, proposed zone:	
<u>AFFIDAVIT</u>			
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. The appropriate district office shall be notified before setting surface pipe;			
			l be set by circulating cement to the top; in all cases surface
• •	_	•	lus a minimum of 20 feet into the underlying formation;
3. If the well is dry, a plugging proposal shall be submitted to the district office. An agreement between the operator			
and the district office on plug length and placement is necessary prior to plugging; 4. The appropriate district office will be notified before well is either plugged or production casing is cemented in;			
5. If an Alternate II completion, production pipe shall be cemeated from below any usable water to surface within 120 days			
of spud date. 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.			
AVOTATE IN A LEGACITA			
Date: 6-26-89 Signature of Operator or Agent: Date: 6-26-89 Signature of Operator or Agent: Date: 6-26-89 Signature of Operator or Agent: Owner BY RED TIGER OF LLING CO.			
		DI KED IIG	FOR IN: USE:
	5280 4950	·	
	4620 SAIF		API # 15-/63-23,049 0000
<del>╒╒╒╒╒╒╒╒╒╒╒╒╒╒╒╒╒╒╒╒╒╒╒╒╒╒╒╒╒╒╒╒╒╒╒╒</del>	4290 **		Conductor pipe required NONE feet Minimum surface pipe required 200 feet per Alt. * 2
	3960 3630 JU		Approved by: 10 6-27-89
<del>┞┞┞</del> ┼ <del>╏╏╏╏</del>	3300	2 7 1000	EFFECTIVE DATE: 7-03-89
	2970 VIVOEN	· · · · · · · · · · · · · · · · · · ·	This authorization expires:
	2310 Wich	VALIUN UIVISIUN	6 months of effective date.)
┠ <del>╸┡╶┡</del> ╶╂ <del>╶╏╶╏╶╏</del>	1 1.222 110	ita, Kansas	Spud date: Agent:
	1650	13/81 L	
<del>┠╶┨╶╏╸╏╸╏╸╏╸╏╸╏╸╏╸</del>	<del>     </del>   990   <i>(</i> 9 \	V	REMEMBER TO:
	660		t Application (form CDP-1) with Intent to Drill;
	1   <b>1</b>	- File Completi	on Form ACO-1 within 120 days of spud date:

- File acreage attribution plat according to field proration orders;

Submit plugging report (CP-4) after plugging is completed;
Obtain written approval before disposing or injecting salt water.

- Notify appropriate district office 48 hours prior to workover or re-entry;