

CARD MUST BE TYPED

CORRECTED

NOTICE OF INTENTION TO DRILL

(see rules on reverse side)

CORRECTED

CARD MUST BE SIGNED

8-29-85

Starting Date: Est. 9 month 8 day 85 year

API Number 15- 179-20833 -0000
440' Loc in

OPERATOR: License # 6114
Name DON E. PRATT
Address P.O. BOX 370
City/State/Zip HAYS, KANSAS 67601
Contact Person DON E. PRATT
Phone 913-625-3446

NE NE NW 1/4 Sec 22 Twp 8 S, Rge 26
(location) East West

4840 Ft North from Southeast Corner of Section
3080 Ft West from Southeast Corner of Section
(Note: Locate well on Section Plat on reverse side)

CONTRACTOR: License # 6033
Name MURFIN DRILLING COMPANY
City/State WICHITA, KANSAS 67202

Nearest lease or unit boundary line 440 feet.
County SHERIDAN
Lease Name C. ROBBEN "B" Well# 1-22

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

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
Projected Total Depth 400 feet
Projected Formation at TD
Expected Producing Formations

Depth to Bottom of fresh water 80 feet
Lowest usable water formation Dakota
Depth to Bottom of usable water 1300 feet
Surface pipe by Alternate: 1 2
Surface pipe to be set 200 feet
Conductor pipe if any required none feet
Ground surface elevation 2407 feet MSL
This Authorization Expires 12-24-85
Approved By 6-24-85 (LC)

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

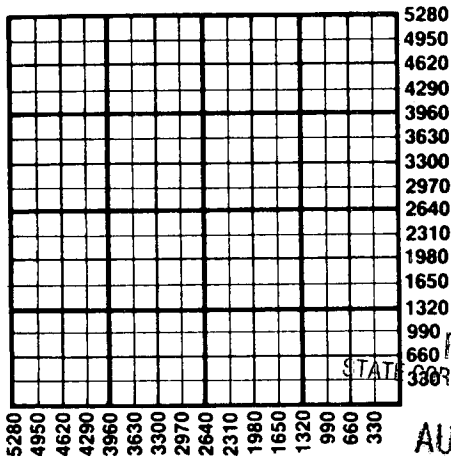
NOTE: PRODUCTION CASING WILL BE CEMENTED TO SURFACE IF RUN, AT TIME OF RUNNING. *was Rod Tied*

Date 8-28-85 Signature of Operator or Agent *[Signature]* Title OPERATOR *DLG*

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.

RECEIVED
If an alternate 2 completion, cement in the production pipe from below
330 CORPORATION COMMISSION
330 CORPORATION COMMISSION

AUG 29 1985

CONSERVATION DIVISION
Wichita, Kansas

8-29-85

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