

CARD MUST BE TYPED

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

CARD MUST BE SIGNED

Starting Date: 9 5 84
month day year

API Number 15- 065-22,056-00-00

OPERATOR: License # 5.25.2
Name R P NIXON OPERATIONS
Address 207 W 12TH
City/State/Zip HAYS KS 67601
Contact Person DAN A NIXON
Phone 913-628-3834

C NW SW Sec 26 Twp 9 S, Rge 25 East
(location) West
1980 Ft North from Southeast Corner of Section
4620 Ft West from Southeast Corner of Section
(Note: Locate well on Section Plat on reverse side)

CONTRACTOR: License # 5128 RIG TAG #36
Name JAY-LAN CORPORATION
City/State HAYS KS 67601

Nearest lease or unit boundary line 660 feet.
County GRAHAM
Lease Name SPIES Well# 1

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 4000 feet
Projected Formation at TD BASE KANSAS CITY
Expected Producing Formations KANSAS CITY

Depth to Bottom of fresh water ~~650~~ feet
Lowest usable water formation DAKOTA
Depth to Bottom of usable water ~~600~~ 1325 feet
Surface pipe by Alternate: 1 240² feet
Surface pipe to be set NONE feet
Conductor pipe if any required NONE feet
Ground surface elevation N.A. feet MSL
This Authorization Expires 2-23-85
Approved By 8-23-84 *R*

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

Date 8-22-84 Signature of Operator or Agent

R Nixon Title OPERATOR

MHC/LOPHE 8/23/84

