

CARD MUST BE TYPED

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

CARD MUST BE SIGNED

Starting Date: .....12.....02.....1984.....  
month day year

API Number 15- 065-22,107-00-00

OPERATOR: License # ..5342.....

SE...NW...NE... Sec .8...Twp .9.S, Rge .25.  East  
(location)  West

Name Beacon Exploration Company.....

Address .410.17th.St.,.Suite.2300.....

City/State/Zip ..Denver,.Colorado....80202.....

Contact Person David.Kranz.....

Phone .....(303).825-1966.....

.....4290..... Ft North from Southeast Corner of Section

.....1650..... Ft West from Southeast Corner of Section

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

CONTRACTOR: License # ..5422.....

Nearest lease or unit boundary line .....990..... feet.

County .....Graham.....

Name .Abercrombie.Drilling,.Inc.....

City/State ..Wichita,.Kansas.....

Lease Name .....Fly..... Well# ...1-8....

Domestic well within 330 feet :  yes  no

Municipal well within one mile :  yes  no

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 .....100/25<sup>infe</sup>..... feet

Lowest usable water formation .....Dakota.....

Depth to Bottom of usable water ..1300...1200..... feet

Surface pipe by Alternate : 1  2

Surface pipe to be set .....200..... feet

Conductor pipe if any required .....N/A..... feet

Ground surface elevation .....2550..... feet MSL.

This Authorization Expires .....5-5-85.....

Approved By .....11-5-84.....

If OWWO: old well info as follows:

Operator .....

Well Name .....

Comp Date ..... Old Total Depth .....

Projected Total Depth .....4175..... feet

Projected Formation at TD .....Lansing.....

Expected Producing Formations Lansing.....

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

Date ...11/1/84... Signature of Operator or Agent

*David Kranz*

Title Drlg/Prod.Engineer.....

*m Hc/WOHE 11/5/84*

