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 Marc	h 8, 19	89	S/2 N/2 NE sec . 3. Twp	
month	¥	year		
		,	4290 feet from South line of Section	
OPERATOR: License # .6861			1320 feet from East line of Section	
Name: Ron's Oil Operations, Inc.			(Note: Locate well on Section Plat Below)	
		(Note: Locate wett on Section Flat Below)		
Address:POBOX. City/State/Zip:Peno	t.37 kee KS 676	59	Choridan	
City/State/Zip:	Nicholcon	~ ~	County:Sheridan	
Contact Person:Ron			Lease Name: Sheehan Well #: 1	
Phone: (913)-674-2409			Field Name: Wildcat	
			Is this a Prorated Field? yes .X. no	
CONTRACTOR: License #:			Target Formation(s): .Mississippi	
Name: Emphasis Oil Operations			Nearest lease or unit boundary: 990	
			Ground Surface Elevation: Est 2591 feet MSL	
Well Drilled For:	Well Class:	Type Equipment:	Domestic well within 330 feet: yes .X. no	
			Municipal well within one mile: yes .X. no	
X. oil inj	Infield	.X Mud Rotary	Depth to bottom of fresh water:400 200	
Gas 🐣 Storage	Pool Ext.	•	Depth to bottom of usable water:	
		•	· · · · · · · · · · · · · · · · · · ·	
OWWO Disposal	.X. Wildcat	Cable	Surface Pipe by Alternate: 1 .X. 2	
Seismic; # of Holes			Length of Surface Pipe Planned to be set:240	
			Length of Conductor pipe required:\\/A	
If OWWO: old well information	on as follows:		Projected Total Depth:4300'	
Operator:			Formation at Total Depth: Mississippi	
Well Name:			Water Source for Drilling Operations:	
Comp. Date: Old Total Depth			well farm pond other	
			DWR Permit #:	
Directional, Deviated or Horizontal wellbore? yes .X no			Will Cores Be Taken?: yes .X. no	
If yes, total depth location			If yes, proposed zone:	
		AFFI	DAVIT	
•			······································	
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;				
2. The minimum amount of surface pipe as specified above shall be set by circulating cement to the top; in all cases surface				
pipe shall be set through all unconsolidated materials plus 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;				
 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 cemented 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 #est\of my knowledge—and belief.				
Date:	gnature of Operat	or or Agent	Mix Stamme Little Agent	
	5280		FOR KCC USE:	
┡┋┋┋	4950		API # 15- 179- 20,940-00-00 V	
	4620	RECEIVED	Conductor nine required fact	
	4290 3960TATE	NEUEIVEU	Minimum surface pipe required 200' feet per Alt. & 2	
▗ 	3630 A H	PHPUHATIUN COMMISS	Opproved by: LKM 3-6-89	
┡╶╅╌╏┈╏┈┩┈┞┈╏┈┩╸┞╸╏╸ ┩	3300		EFFECTIVE DATE: 3-//-89	
┠╶╏╶╏╶╏╶╏╶╏╶╏╶╏╶╏╶╏ ╌╏	2970	1AR 0 6 1989	This authorization expires: 9-6-89	
	2640	1711 U U 1303	(This authorization void if drilling not started within 6 months of effective date.)	
	1980	15-06-1989	Spud date: Agent:	
┠┈╏┈╏┈╏┈╏┈╏┈╏┈╏┈╏┈╏	1650	ISERVATION DIVISION	, , , , , , , , , , , , , , , , , , , ,	
1320 Wichlta, Kanses				
	REMEMBER TO:			
┠ ┩╏╏╏╏┼╬┼╋╇	330		Pit Application (form CDP-1) with Intent to Drill; Tion Form ACO-1 within 120 days of spud date;	
		· rite compte	LIVILIONNI NOO I MICHINI 120 UQYS UL SPOU UQLE,	

- 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;