FORM NUST BE TYPED FORM C-1 4/90

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

| | | | , au, o p. , o. o o o o o o o o o o o o o o o o o | | East |
|---|-----------------------|---|--|--|--------------------|
| Expected Spud Date | | • | SW SW NE Sec | 33. Twp9. s, Rg .33. | XX West |
| month | day | year | 29701 | fork form brook life. | |
| | 4620 | | 2970' | . feet from South line of | or Section |
| OPERATOR: License # | 1029 | TN- | 2310' | | |
| | ll Company, | | (Note: Locate well on | Section Plat on Reverse | e Side) |
| Address: 200 E. I | irst, Suite | 208 | · | | |
| City/State/Zip:Wic | chita, KS 67 | 202 | County: Thomas | | |
| Contact Person: Rai | ıl F. Brito | | Lease Name: Frieser | 1 Well #:1- | 33 |
| Phone: 316 | 5-263-8787 | | Field Name: Herbel | South | |
| ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | Is this a Prorated Field | | no / |
| CONTRACTOR: License #: | 5104 | | Target Formation(s): | Lansing, Marma | ton / |
| Name: Blue Goo | | | Nearest lease or unit bo | undary. 330 | · |
| Name: | | | Ground Surface Elevation | 3160 (EST) | feet/ MSI |
| | Well Class: | Type Equipment: | Domestic well within 330 | | |
| Well Drilled For: | well Class: | Type Equipment: | Municipal well within on | | |
| v | | V u l b l | municipal well within on | 290 · | " V. |
| X. Oil Inj | | .X Mud Rotary | Depth to bottom of fresh | water:A√X | |
| | X. Pool Ext. | | Depth to bottom of usabl | | |
| OWWO Disposa | | Cable | Surface Pipe by Alternat | e:1 X2 | 501 |
| Seismic; # of Ho | les | | Surface Pipe by Alternat Length of Surface Pipe P | lanned to be set:ץ. | برد. |
| | | | rength of conductor pipe | required: | |
| If OWWO: old well inform | | • | Projected Total Depth: . | | |
| Operator: | | | Formation at Total Depth | | |
| Well Name: | | | Water Source for Drillin | g Operations: | |
| Comp. Date: | Old Total Dep | oth | | well farm pond . | X other |
| | | | DWR Permit #: | | <i>.[</i> |
| Directional, Deviated or | Horizontal wellbore | ? yes .X. no | Will Cores Be Taken?: | | |
| If yes, total depth loca | tion: | | If yes, proposed zone: . | | • • • • • • • • • |
| D A A | 10 . h. | | | | |
| Provated for | Cholokee | AFFIDAY | <u>/IT</u> | | |
| | | | eventual plugging of this we | ll will comply with K.S./ | A. 55-101, |
| et. seq. | | 3, | F-133-113 | , , | · |
| It is agreed that the fo | | | | • | |
| 1. The appropriate | district office shal | l be notified before | setting surface pipe; | | . |
| 2. The minimum amour | nt of surface pipe as | s specified above shall | l be set by circulating cementus a minimum of 20 feet int | nt to the top; in all case | es surtace ion- |
| 7 If the well is d | t through all uncors | sociocated materials pro- osal shall be submitte | ed to the district office. | An agreement between the | on, e operator |
| and the district | office on plug leng | th and placement is_ | peessary prior to plugging; | | • |
| 4. The appropriate | district office will | be notified before | ell is either plugged or pr | oduction casing is cemer | nted in; |
| 5. If an Alternate 1 | II completion, produ | ction pipe shall be co | emented from below any usabl | e water to surface within | n 120 days |
| of spud date. I | n all cases, notity | district office prior | the best of my knowledge ar | nd helief | |
| | e statements-made ne | remare true and to | the best of the knowledge an | | |
| Date: 7-12-91 | . Signature of Operat | or or Agent: | · | itlePresident | |
| • | FOR KCC USE | :• | | | |
| | i | | 4 00 00 | | |
| | API # 15 | 193-20,56 | 54-00-00 | 7 1 | 10.0 |
| | Conductor : | oipe required ' //)&: | refeet _ | Q H | |
| | Minimum su | face pipe required 3 | feet per Alt. (2) | S C C S S S | $[\mathcal{W}]$ |
| | EFFECTIVE I | 1: MUY-12-7 | | RECEIVED PARTIES OF THE PROPERTY OF THE PROPER | |
| | | rization expires: | 7-12-92 | 景≦ \$55 | |
| | | | lling not started within | | 1.0 |
| | 6 months | of effective date.) | | | 12 |
| | Spud date: | Age | ent: | | 1 |
| | l | | | RECEIVED TO CONSERVATION DIVISION Widhita, Kansas | |
| | | REMEMBER | TO: | AU NUISUN | |
| | | |) with Intent to Drill; | 25 | $ \mathcal{U} $ |
| | | orm ACO-1 within 120 | | | W |
| | - File acreage attr | ibution plat according | g to field proration orders; hours prior to workover or | no-ontru: | '2' |
| | - MOTITY appropriat | e district office 48 | nours prior to workover or | ie ciiliy, | (*) |

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

PLAT OF ACREAGE ATTRIBUTABLE TO A WELL

State Corporation Commission, Conservation Division 200 Colorado Derby Bldg. Wichita, Kansas 67202

| openamon Brito Oil Company Inc | 7.0 | | | | |
|--|---|--|--|--|--|
| OPERATOR Brito Oil Company, Inc. LEASE Friesen #1-33 | | | | | |
| WELL NUMBER #1033 | feet north of SE corner feet west of SE corner | | | | |
| FIELD Herbel South | Sec. 33 T 9 R 33 \&\/\ \\\ \\ | | | | |
| | COUNTY Thomas | | | | |
| NO. OF ACRES ATTRIBUTABLE TO WELL 20 | | | | | |
| DESCRIPTION OF ACREAGE NE/4 | CORNER BOUNDARY. | | | | |
| NOTE: If plat depicted is insufficient | for your circumstances, you may attach | | | | |
| your own scaled or surveyed plat. | j | | | | |
| ° PL | AT | | | | |
| 292 | 827 | | | | |
| | <u> </u> | | | | |
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| | 236 | | | | |
| 32 | 34 | | | | |
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| 5 | · | | | | |
| In platting the proposed location of the wall wou much | about | | | | |
| In plotting the proposed location of the well, you must | SHOW: | | | | |
| The manner in which you are using the depicted section with 8 surrounding partial sections, 4 | <pre>tplat, by identifying section lines, i.e. 1 section 1 sections, 16 sections, etc.:</pre> | | | | |
| of the second of | | | | | |
| | cother wells producing from the same common source of K.A.R. 82-3-108, 82-3-207, 82-3-312, or special orders | | | | |
| 3) the distance of the proposed drilling location | from the section's east and south lines: and | | | | |
| 4) the distance to the nearest lease or unit bound | | | | | |
| I hereby certify that the statements made herein are true and to the best of my knowledge and belief. | | | | | |
| Signature of Operator or Agent | Note that we will be the second of my knowledge and better. | | | | |
| A Comment of Marine | | | | | |

Title President