

OWWO

For KCC Use: 10-11-08
Effective Date: 10-11-08
District #
SGA? Yes No

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
NOTICE OF INTENT TO DRILL

Form C-1
October 2007
Form must be Typed
Form must be Signed
All blanks must be Filled

Must be approved by KCC five (5) days prior to commencing well

Expected Spud Date: October 7, 2008
month day year

OPERATOR: License# 4767 ✓
Name: Ritchie Exploration, Inc.
Address 1: PO 783188
Address 2:
City: Wichita State: KS Zip: 67278 + 3188
Contact Person: Justin Clegg
Phone: 316-691-9500

CONTRACTOR: License# 5929 ✓
Name: Duke Drilling Co., Inc.

Well Drilled For: Oil Gas Enh Rec Storage Disposal Seismic Other
Well Class: Infield Pool Ext. Wildcat Other
Type Equipment: Mud Rotary Air Rotary Cable

If OWWO: old well information as follows:
Operator: Hugoton Energy Corp.
Well Name: #1-32 Patton
Original Completion Date: 10-31-1995 Original Total Depth: 5410'

Directional, Deviated or Horizontal wellbore? Yes No
If Yes, true vertical depth:
Bottom Hole Location:
KCC DKT #:

Spot Description: C NE NE Sec. 32 Twp. 28 S. R. 23 E W
660 feet from N / S Line of Section
660 feet from E / W Line of Section
Is SECTION: Regular Irregular?

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

County: Ford
Lease Name: Arch OWWO Well #: 1
Field Name: Wildcat

Is this a Prorated / Spaced Field? Yes No
Target Formation(s): Mississippian

Nearest Lease or unit boundary line (in footage): 660'
Ground Surface Elevation: 2455 feet MSL

Water well within one-quarter mile: Yes No
Public water supply well within one mile: Yes No

Depth to bottom of fresh water: 200
Depth to bottom of usable water: 520

Surface Pipe by Alternate: I S
Length of Surface Pipe Planned to be set: Set at 660'

Length of Conductor Pipe (if any): NONE
Projected Total Depth: 5410'

Formation at Total Depth: Mississippian

Water Source for Drilling Operations: Well Farm Pond Other: X

DWR Permit #: (Note: Apply for Permit with DWR)
Will Cores be taken? Yes No
If Yes, proposed zone:

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OCT 03 2008
CONSERVATION DIVISION
WICHITA, KS

AFFIDAVIT

The undersigned hereby affirms that the drilling, completion and eventual plugging of this well will comply with K.S.A. 55 et. seq.

It is agreed that the following minimum requirements will be met:

1. Notify the appropriate district office **prior** to spudding of well;
2. A copy of the approved notice of intent to drill **shall be** posted on each drilling rig;
3. The minimum amount of surface pipe as specified below **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.
4. If the well is dry hole, an agreement between the operator and the district office on plug length and placement is necessary **prior to plugging**;
5. The appropriate district office will be notified before well is either plugged or production casing is cemented in;
6. If an ALTERNATE II COMPLETION, production pipe shall be cemented from below any usable water to surface within **120 DAYS** of spud date.
Or pursuant to Appendix "B" - Eastern Kansas surface casing order #133,891-C, which applies to the KCC District 3 area, alternate II cementing must be completed within 30 days of the spud date or the well shall be plugged. **In all cases, NOTIFY district office** prior to any cementing.

I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date: October 2, 2008 Signature of Operator or Agent: [Signature] Title: GIS Specialist

For KCC Use ONLY
API # 15 - 057-20536-00-01
Conductor pipe required None feet
Minimum surface pipe required 661 feet per ALT. I II
Approved by: [Signature] 10-6-08
This authorization expires: 10-6-09
(This authorization void if drilling not started within 12 months of approval date.)
Spud date: Agent:

Remember to:

- File Drill Pit Application (form CDP-1) with Intent to Drill;
- File Completion Form ACO-1 within 120 days of spud date;
- File acreage attribution plat according to field proration orders;
- Notify appropriate district office 48 hours prior to workover or re-entry;
- Submit plugging report (CP-4) after plugging is completed (within 60 days);
- Obtain written approval before disposing or injecting salt water.
- If this permit has expired (See: authorized expiration date) please check the box below and return to the address below.

Well Not Drilled - Permit Expired Date: Signature of Operator or Agent:

32 28 23 E W

IN ALL CASES PLOT THE INTENDED WELL ON THE PLAT BELOW

Plat of acreage attributable to a well in a prorated or spaced field

If the intended well is in a prorated or spaced field, please fully complete this side of the form. If the intended well is in a prorated or spaced field complete the plat below showing that the well will be properly located in relationship to other wells producing from the common source of supply. Please show all the wells and within 1 mile of the boundaries of the proposed acreage attribution unit for gas wells and within 1/2 mile of the boundaries of the proposed acreage attribution unit for oil wells.

API No. 15 - 057-20536-00-01

Operator: Ritchie Exploration, Inc.

Lease: Arch OWWO

Well Number: 1

Field: Wildcat

Number of Acres attributable to well: _____

QTR/QTR/QTR/QTR of acreage: _____ - C - NE - NE

Location of Well: County: Ford

660 feet from N / S Line of Section

660 feet from E / W Line of Section

Sec. 32 Twp. 28 S. R. 23 E W

Is Section: Regular or Irregular

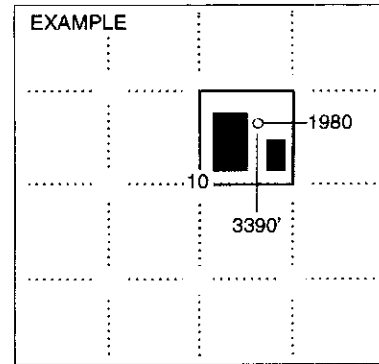
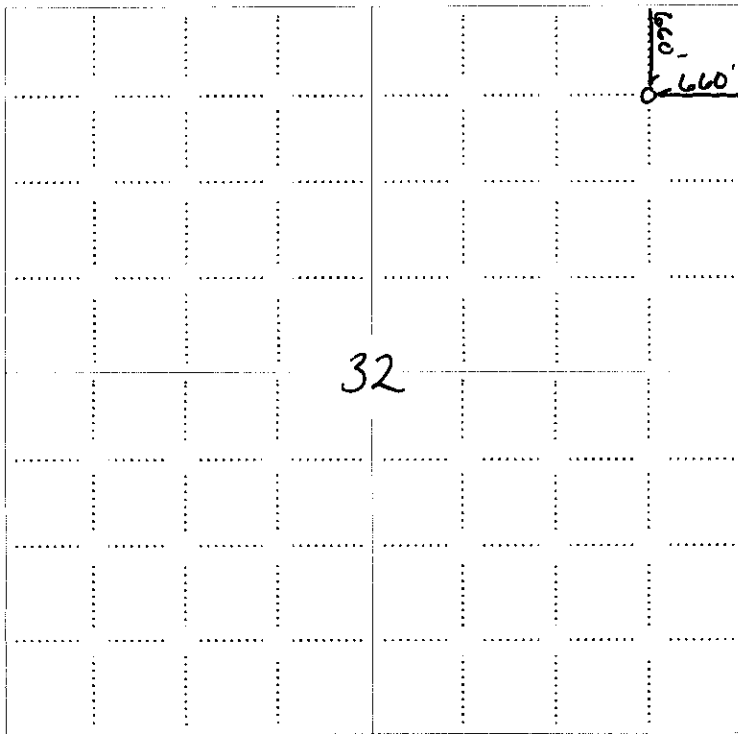
If Section is Irregular, locate well from nearest corner boundary.

Section corner used: NE NW SE SW

PLAT

(Show location of the well and shade attributable acreage for prorated or spaced wells.)

(Show footage to the nearest lease or unit boundary line.)



NOTE: In all cases locate the spot of the proposed drilling location.

In plotting the proposed location of the well, you must show:

1. The manner in which you are using the depicted plat by identifying section lines, i.e. 1 section, 1 section with 8 surrounding sections, 4 sections, etc.
2. The distance of the proposed drilling location from the south / north and east / west outside section lines.
3. The distance to the nearest lease or unit boundary line (in footage).
4. If proposed location is located within a prorated or spaced field a certificate of acreage attribution plat must be attached: (CO-7 for oil wells; CG-8 for gas wells).

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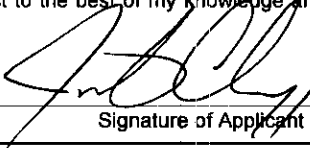
OCT 03 2008

CONSERVATION DIVISION
WICHITA, KS

**KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
APPLICATION FOR SURFACE PIT**

Form CDP-1
April 2004
Form must be Typed

Submit in Duplicate

Operator Name: Ritchie Exploration, Inc.		License Number: 4767
Operator Address: PO 783188		Wichita KS 67278
Contact Person: Justin Clegg		Phone Number: 316-691-9500
Lease Name & Well No.: Arch OWWO 1		Pit Location (QQQQ): C NE NE
Type of Pit: <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Burn Pit <input type="checkbox"/> Settling Pit <input type="checkbox"/> Drilling Pit <input checked="" type="checkbox"/> Workover Pit <input type="checkbox"/> Haul-Off Pit <small>(If WP Supply API No. or Year Drilled)</small>	Pit is: <input checked="" type="checkbox"/> Proposed <input type="checkbox"/> Existing If Existing, date constructed: _____ Pit capacity: 15,387 (bbls)	Sec. 32 Twp. 28 R. 23 <input type="checkbox"/> East <input checked="" type="checkbox"/> West 660 Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section 660 Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section Ford County
Is the pit located in a Sensitive Ground Water Area? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Chloride concentration: _____ mg/l <small>(For Emergency Pits and Settling Pits only)</small>
Is the bottom below ground level? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Artificial Liner? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	How is the pit lined if a plastic liner is not used? Cottonseed Hulls / Aqua Gel
Pit dimensions (all but working pits): 120 Length (feet) 120 Width (feet) <input type="checkbox"/> N/A: Steel Pits Depth from ground level to deepest point: 6 (feet) <input type="checkbox"/> No Pit		
If the pit is lined give a brief description of the liner material, thickness and installation procedure.		Describe procedures for periodic maintenance and determining liner integrity, including any special monitoring.
Distance to nearest water well within one-mile of pit 443 feet Depth of water well 36 feet		Depth to shallowest fresh water 75 feet. Source of information: <input type="checkbox"/> measured <input type="checkbox"/> well owner <input type="checkbox"/> electric log <input checked="" type="checkbox"/> KDWR
Emergency, Settling and Burn Pits ONLY: Producing Formation: _____ Number of producing wells on lease: _____ Barrels of fluid produced daily: _____ Does the slope from the tank battery allow all spilled fluids to flow into the pit? <input type="checkbox"/> Yes <input type="checkbox"/> No		Drilling, Workover and Haul-Off Pits ONLY: Type of material utilized in drilling/workover: Fresh / Chemical Mud Number of working pits to be utilized: 3 Abandonment procedure: Backfill Drill pits must be closed within 365 days of spud date
I hereby certify that the above statements are true and correct to the best of my knowledge and belief.		RECEIVED KANSAS CORPORATION COMMISSION
October 2, 2008 Date	 Signature of Applicant or Agent	OCT 03 2008 CONSERVATION DIVISION WICHITA, KS
KCC OFFICE USE ONLY		
Steel Pit <input type="checkbox"/> RFAC <input type="checkbox"/> RFAS <input type="checkbox"/>		
Date Received: 10/3/08 Permit Number: _____ Permit Date: 10/3/08 Lease Inspection: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

15-057-20536-09-01

STATE OF KANSAS
STATE CORPORATION COMMISSION
130 S. Market, Room 2078
Wichita, Kansas 67202

WELL PLUGGING RECORD
K.A.R. -82-3-117

API NUMBER 15-057-20536-000
LEASE NAME Patton
WELL NUMBER 1-32

TYPE OR PRINT
NOTICE: Fill out completely
and return to Coms. Div.
office within 30 days.

660 Ft From N Section Line
660 Ft From E Section Line

Lease Operator Hugoton Energy Corporation

Sec. 32 Twp 28 S Rge 23 W

Address 301 N. Main, Suite 1900, Wichita, KS 67202

County Ford

Phone # (316) 262-1522 Operator License No. 3871

Date Well Completed 10/30/95

Character of Well D&A

Plugging Commenced 10/30/95

(Oil, Gas, D&A, SWD, Input, Water Supply Well)

Plugging Completed 10/31/95

The plugging proposal was approved on 10/30/95 (date)

by Steve Durrant (KCC District Agent's Name).

Is ACO-1 filed? Yes If not, is well log attached? _____

Producing Formation _____ Depth to Top _____ Bottom _____ T.D. 5410'

Show depth and thickness of all water, oil and gas formations.

Oil, Gas or Water Records		Casing Record				
Formation	Content	From	To	Size	Put In	Pulled Out
		Surface	661'	8-5/8"	661'	0

Describe in detail the manner in which the well was plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. If cement or other plugs were used, state the character of same and depth placed, from ___ feet to ___ feet each set.

50 sx @1450', 50 sx @ 690', 10 sx @ 40', 15 sx in Rathole (125 total sx) of 60-40 poz, 6% gel.

Name of Plugging Contractor Pickrell Drilling Co. License No. 5123

Address 110 N. Market, Suite 205, Wichita, KS 67202

Name of Party Responsible for Plugging Fees: Hugoton Energy Corporation

State of Kansas County of Sedgwick, ss.

Earl Ringeisen (Employee of Operator) or (Operator) of above-described well, being first duly sworn on oath, says: That I have knowledge of the facts, statements, and matters herein contained and the log of the above-described well as filed that the same are true and correct, so help me God.

(Signature) Earl Ringeisen
(Address) 301 N. Main, Suite 1900, Wichita KS 67202

SUBSCRIBED AND SWORN TO before me this 18TH day of DEC., 19 95

Arlene Valliquette
Notary Public

My Commission Expires: July 21, 1999

USE ONLY ONE SIDE EACH FORM

NOTARY PUBLIC - STATE OF KANSAS
ARLENE VALLIQUETTE
My Appt. Exp. 7-21-99

Form CP-4
Revised 05-88