1. Operator ___

Address

Address

4. Well to be Drilled for: Oil

TO BE FILED WITH THE STATE CORPORATION COMMISSION PRIOR TO COMMENCEMENT OF WELL

Box 45442, Tulsa, OK

Box 506, Russell, KS 67665

3. Type of Equipment: Rotary X Cable Tool

Disposal Other

Robert R. Price

2. Contractor ___ Emphasis Oil Operations

5. Depth of Deepest Fresh Water within 1 mile _____

	(For office use only)				
Starting Date _	Augus	st 10	, 19	78	····
County	Ellis				
Sec. 35			_S Rg	e 19	¥ W
Spot Location _	NW NW	NW			
Nearest Lease	Line			330	ft
Lease Name	Hite		_		
Well No1					
Est. Total Dept	th			3850	ft.

API Number 15-051-21.531

REMARKS:

OPERATOR STATES THAT HE WILL COMPLY WITH K. S. A. 55-128

ROBERT R. PRICE

Signature of Operator By,

None

None

200-

74145

Gal X3

Francom

First
Class
Postage

State Corporation Commission of Kansas Conservation Division 245 North Water Wichita, Kansas 67202

RECEIVED
STATE CORPORATION COMMISSION
1-25 1978

:ONSERVATION DIVISION Wichita, Kansas

(IF PREFERRED, MAIL IN ENVELOPE)