FORM MUST BE THEFECTIVE FORM C-1 12/88		NOTICE OF INTENT	TON TO DRILL	ALL BLANKS MUST BE FILLET
	Must be approved	by the K.C.C. five	(5) days prior to commencing	
19			10' East	Fasi
Expected Spud Date .11/15/	/ 89		Win Swin SEin Sec . 2	7. Twp 34 . s, Rg 20 \times West
month	day		•	-
	•		660'	. feet from South line of Section
OPERATOR: License # 4145			.2300.'	. feet from East line of Section
Name: Robert	s & Murphy		(Note: Locate we	ell on Section Plat Below)
Address: 1500 N	.Market,Suit	e#R-300		, , , , , , , , , , , , , , , , , , , ,
city/state/Zip: .Shreve	port, LA	711.07	County: Comanche	••••
Contact Person: Brad	Cummings		Lease Name: Petty	
Phone: 318/22	21-8601		Field Name: Box Ranc	h
			Is this a Prorated Field	
CONTRACTOR: License #: 5.654			Target Formation(s):	Viola
Name: Rine Drilling Company Wichita, KS 67202			Nearest Lease or unit box	Viola undary: 340'
			Ground Surface Elevation	: Approx, 1740 feet MSI
Well Drilled For:	•	Type Equipment:		feet: yes X no
THE STREET PORT	mett 61833.	-, pe population		e mile: yes A no
K. Oil Inj	Infield	.¥. Mud Rotary		e mite: yes A no water:100!
X. Gas Storage		•		water:
OWMO Disposal		Cable		
Seismic; # of Holes	witucat	··· Cable	Surface Pipe by Alternate	e: .X. 1 2 lanned to be set: 650!
Sersmic; w or notes			Length of Surface Pipe Pi	tanned to be set: עַלְּעָּ
If OHNO: old well information as follows:			Length of Conductor pipe	required: 80' 6500'
Operator:			Frojected Total Depth:	Arbuckle
Well Name:			Water Source for Drilling	
Comp. Date:			water source for pritting	g Uperations: well farm pond .X. xxxxxx
	ota rotat bep	(11	DUD Daniela H	well farm pond .AXXXXXX
Directional Daviated on No.	ivontal unilbana	You X no		· · · · · · · · · · · · · · · · · · ·
Directional, Deviated or Horizontal wellbore? yes .X. no If yes, total depth location:			Will Cores Be Taken?: yes X no If yes, proposed zone:	
Tyes, total depth total for		• • • • • • • • • • • • • • • • • • • •	ii yes, proposed zone:	* * * * * * * * * * * * * * * * * * *
		AFFIDA	VIT	
:				
he undersigned hereby affir	ms that the drill	ing, completion and	eventual plugging of this wel	l will comply with K.S.A. 55-101,
t. seq. t is agreed that the follow	ing minimum assu		_	
1. The appropriate dist	ring minimum requ crict office shal	irements will be met L be notified before	: setting surface nine:	
2. The minimum amount o	f surface pipe as	specified above shall	l be set by circulating cemen	t to the top; in all cases surface
pipe shall be set th	rrough all uncons	olidated materials p	lus a minimum of 20 feet into	o the underlying formation;
3. If the well is dry,	a plugging propos	sal shall be submitt	ed to the district office. F	An agreement between the operator
4. The appropriate dist	rice on plug leng	th and placement is	necessary prior to plugging;	oduction casing is cemented in;
5. If an Alternate II c	ompletion, produc	tion pipe shall be c	emented from below any usable	water to surface within 120 days
of spud date. In al	ll cases, notify (district office prio	r to any cementing.	
hereby certify that the st	atements made he	rein are true and to	the best of my knowledge and	d belief.
Date: .11/10/89 Si	anature of Operati		4 (840)	itle President - Rine
	gilature or operati	KE. J	. Rine, Agent)	Drilling Company
	5280		FOR KCC USE:	100
	4950			1 1
┦┤╏╏┤┦╎╏┤╏┤┡	4620	是一名	API # 15-033-20,774	105
	4290 3960	经下 了 计	Conductor pipe required <u>No</u> Minimum surface pipe required	
	3630	No.	Approved by: DPW 11-14.	
┨╏╏╏	3300	P V V	EFFECTIVE DATE: //-/9-	. 89
	2970		This authorization expires:	3 17-10
	2640	\$ 5 .5 \$	(This authorization void if a	` II
╅╅╀╂┼┼┼╂┼┼┼╂┼	1980	[2 Can]3		
·╂╶┩╸┫╶╎╴╏╶╏╸╏╸╏╸╏	1650			
	1980	[2 Can]3	6 months of effective date. Spud date:	

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

Mail to: Conservation Division, 200 Coloredo Derby Building, 202 W. First St., Wichita, Kansas 67202-1286.

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REMEMBER TO:
- File Drill Pit Application (form CDP-1) with Intent to Drill;

file acreage attribution plat according to field proration orders;
 Notify appropriate district office 48 hours prior to workover or re-entry;

- File Completion Form ACO-1 within 120 days of spud date;