

CARD MUST BE TYPED

NOTICE OF INTENTION TO DRILL
(see rules on reverse side)

CARD MUST BE SIGNED

Starting Date: December 8, 1984
 month day year

OPERATOR: License # 5273
 Name Kiowa Exploration Company
 Address 110 So. Main, Suite #510
 City/State/Zip Wichita, Kansas 67202
 Contact Person J. Corry Tinsmon
 Phone (316) 267-0228

CONTRACTOR: License # 5422
 Name Abercrombie Drilling, Inc.
 City/State Wichita, Kansas 67202

| | | |
|---|--------------------|------------------------|
| Well Drilled For: | Well Class: | Type Equipment: |
| <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Swd <input type="checkbox"/> Infill <input checked="" type="checkbox"/> Mud Rotary | | |
| <input type="checkbox"/> Gas <input type="checkbox"/> Inj <input checked="" type="checkbox"/> Pool Ext. <input type="checkbox"/> Air Rotary | | |
| <input type="checkbox"/> OWWO <input type="checkbox"/> Expl <input type="checkbox"/> Wildcat <input type="checkbox"/> Cable | | |

If OWWO: old well info as follows:

Operator
 Well Name
 Comp Date Old Total Depth
 Projected Total Depth 4750 feet
 Projected Formation at TD Mississippian
 Expected Producing Formations KC & Cherokee & Miss

I certify that we will comply with K.S.A. 55-101, et seq., plus eventually plugging hole to K.C.C. specifications.

Date 11-13-84 Signature of Operator or Agent

API Number 15- 109-20,359-00-00

NE NE Sec 29 Twp 12 S, Rge 33 ☐ East
 (location) ☒ West

4620 Ft North from Southeast Corner of Section
 660 Ft West from Southeast Corner of Section
 (Note: Locate well on Section Plat on reverse side)

Nearest lease or unit boundary line 660 feet.

County Logan

Lease Name Smith Well# 1

Domestic well within 330 feet: ☐ yes ☒ no

Municipal well within one mile: ☐ yes ☒ no

Depth to Bottom of fresh water 200 feet

Lowest usable water formation 400 Dakota

Depth to Bottom of usable water 700 1700 feet

Surface pipe by Alternate: 1 ☐ 2 ☒

Surface pipe to be set 375 feet

Conductor pipe if any required feet

Ground surface elevation 3139 feet MSL

This Authorization Expires 5-13-85

Approved By 11-13-84

Date 11-13-84 Signature of Operator or Agent Title Managing Partner

Form C-1 4/84

MHC/KOHE 11/13/84

Must be filed with the K.C.C. five (5) days prior to commencing well
This card void if drilling not started within six (6) months of date received by K.C.C.

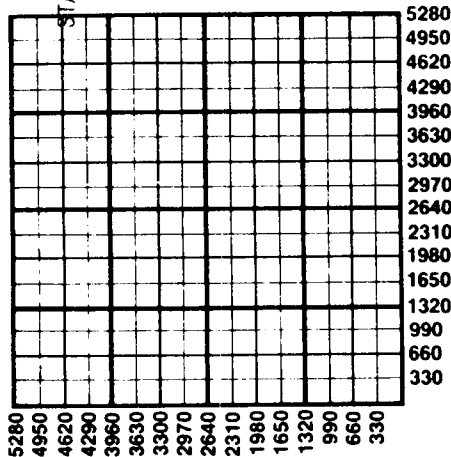
11-13-1984

RECEIVED
STATE CORPORATION COMMISSION

NOV 13 1984

Regular Section of Land
1 Mile 5 1/4 Section of Land
180 Ft.

CONSERVATION DIVISION
Wichita, Kansas



Important procedures to follow :

1. Notify District office before setting surface casing.
2. Set surface casing by circulating cement to the top.
3. File completion forms ACO-1 with K.C.C. within 90 days of well completion, following instructions on ACO-1, side 1, and including copies of wireline logs.
4. Notify District office 48 hours prior to old well workover or re-entry.
5. Prior to plugging, prepare a plugging plan, then obtain agreement from the appropriate district office for an approved plugging plan.
6. Submit plugging report (CP-4) to K.C.C. after plugging is completed.
7. Obtain an approved injection docket number before disposing of salt water.
8. Notify K.C.C. within 10 days when injection commences or terminates.
9. If an alternate 2 completion, cement in the production pipe from below any usable water to surface within 120 days of spud date.

State Corporation Commission of Kansas
Conservation Division
200 Colorado Derby Building
Wichita, Kansas 67202
(316) 263-3238