

EFFECTIVE DATE: 2-10-91

15-051-24726-00-00

FORM MUST BE TYPED  
FORM C-1 4/90

State of Kansas

FORM MUST BE SIGNED  
ALL BLANKS MUST BE FILLED

NOTICE OF INTENTION TO DRILL

Must be approved by the K.C.C. five (5) days prior to commencing well

Expected Spud Date February.....13.....1991.....  
month day year

APP NE NE SE Sec 24 Twp 11 S, Rg 17 X East West ✓

OPERATOR: License # 5447 ✓  
Name: OXY USA INC.  
Address: 110 S, Main #800  
City/State/Zip: Wichita, Kansas 67202  
Contact Person: Michael D. Harrison  
Phone: (316) 265-5624

.....2310..... feet from South line of Section ✓  
.....450..... feet from East line of Section ✓  
(Note: Locate well on Section Plat on Reverse Side)

CONTRACTOR: License #: 5929 ✓  
Name: Duke Drilling Company

County: Ellis ✓  
Lease Name: Colahan "C" Well #: 10 ✓  
Field Name: Bemis ✓  
Is this a Prorated Field? .. yes .. X no ✓  
Target Formation(s): Arbuckle ✓  
Nearest lease or unit boundary: 450' ✓  
Ground Surface Elevation: 1879..... feet MSL ✓  
Domestic well within 330 feet: .. yes .. X no ✓  
Municipal well within one mile: .. yes .. X no ✓  
Depth to bottom of fresh water: 100' 175' ✓  
Depth to bottom of usable water: 800' 660' ✓  
Surface Pipe by Alternate: .. 1 .. X 2 ✓  
Length of Surface Pipe Planned to be set: 300' ✓  
Length of Conductor pipe required: None ✓  
Projected Total Depth: 3500' ✓  
Formation at Total Depth: Arbuckle ✓  
Water Source for Drilling Operations:  
..... well ..... farm pond X other ✓  
DWR Permit #: .....  
Will Cores Be Taken?: .. yes .. X no ✓  
If yes, proposed zone: ..

Well Drilled For: Well Class: Type Equipment:  
X Oil ... Inj X Infield X Mud Rotary ✓  
... Gas ... Storage ... Pool Ext. ... Air Rotary  
... OWWO ... Disposal ... Wildcat ... Cable  
... Seismic; ... # of Holes

If OWWO: old well information as follows:  
Operator: .....  
Well Name: .....  
Comp. Date: ..... Old Total Depth .....

Directional, Deviated or Horizontal wellbore? .. yes .. X no ✓  
If yes, total depth location: .....

AFFIDAVIT

The undersigned hereby affirms that the drilling, completion and eventual plugging of this well will comply with K.S.A. 55-101, et. seq.

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

1. The appropriate district office shall be notified before setting surface pipe;
2. The minimum amount of surface pipe as specified above 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;
3. If the well is dry, a plugging proposal shall be submitted to the district office. An agreement between the operator and the district office on plug length and placement is necessary prior to plugging;
4. The appropriate district office will be notified before well is either plugged or production casing is cemented in;
5. If an Alternate II completion, production pipe shall be cemented from below any usable water to surface within 120 days of spud date. In all cases, notify district office prior to any cementing.

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

Date: 2-4-91..... Signature of Operator or Agent: Michael D. Harrison..... Title: Operations Manager.....

FOR KCC USE:

API # 15- 051-24726-0000

Conductor pipe required None feet

Minimum surface pipe required 200 feet per Alt. ②

Approved by: MDH 2-5-91

EFFECTIVE DATE: 2-10-91

This authorization expires: 8-5-91

(This authorization void if drilling not started within 6 months of effective date.)

Spud date: \_\_\_\_\_ Agent: \_\_\_\_\_

WALK  
IN

RECEIVED  
STATE CONSERVATION COMMISSION  
FEB 4 1991  
CONSERVATION DIVISION  
Wichita, Kansas  
FR  
MU 1

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;
- Obtain written approval before disposing or injecting salt water.

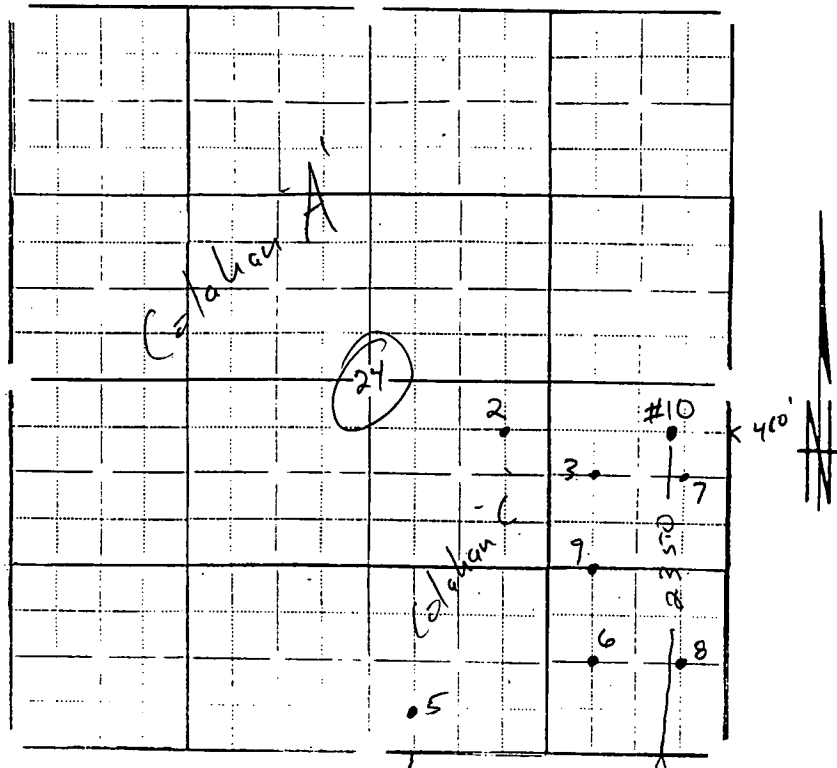
**PLAT OF ACREAGE ATTRIBUTABLE TO A WELL**

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

OPERATOR OXY USA INC. LOCATION OF WELL:  
 LEASE Colahan "C" 2310 feet north of SE corner  
 WELL NUMBER 10 450 feet west of SE corner  
 FIELD Bemis NE-NE-SE Sec. 24 T 11S R 17 ~~E~~/W  
 COUNTY \_\_\_\_\_  
 NO. OF ACRES ATTRIBUTABLE TO WELL 10 IS SECTION X REGULAR \_\_\_\_\_ IRREGULAR?  
 DESCRIPTION OF ACREAGE Pasture IF IRREGULAR, LOCATE WELL FROM NEAREST  
 CORNER BOUNDARY.

NOTE: If plat depicted is insufficient for your circumstances, you may attach your own scaled or surveyed plat.

**PLAT**



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., section, 1/4 section with 8 surrounding partial sections, 4 sections, 16 sections, etc.;
- 2) the well's location relative to the location of other wells producing from the same common source of supply in adjoining drilling units, pursuant to K.A.R. 82-3-108, 82-3-207, 82-3-312, or special orders of the Commission;
- 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 boundary line.

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

Signature of Operator or Agent Michael D. Harrison  
 Michael D. Harrison

Date 2-4-91 Title Operations Manager