

CARD MUST BE TYPED

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

CARD MUST BE SIGNED

Starting Date:11.....23.....84.....
month day year 10/38

API Number 15- **063-20,854-00-00**

OPERATOR: License #5316.....

...SE NW. SE.. Sec . 3. . Twp . 13. S, Rge .30. East
(location) West

NameFalcon Exploration, Inc.....

AddressSuite 1531 KSB BLDG.....

City/State/Zip ...Wichita, KS.....67202.....

Contact Person ..Mike Mitchell.....

Phone(316)262-1378.....

1650 Ft North from Southeast Corner of Section
.....1650..... Ft West from Southeast Corner of Section
(Note: Locate well on Section Plat on reverse side)

CONTRACTOR: License #5302.....

Name ..Red Tiger Drilling.....

City/StateWichita, KS.....

Nearest lease or unit boundary line990..... feet.
CountyGove.....

Lease Name ..Krugar..... Well#L.....

Domestic well within 330 feet : yes no

Municipal well within one mile : yes no

Well Drilled For: Well Class: Type Equipment:

- | | | | |
|---|-------------------------------|---|--|
| <input checked="" type="checkbox"/> Oil | <input type="checkbox"/> Swd | <input type="checkbox"/> Infield | <input checked="" type="checkbox"/> Mud Rotary |
| <input checked="" type="checkbox"/> Gas | <input type="checkbox"/> Inj | <input type="checkbox"/> Pool Ext. | <input type="checkbox"/> Air Rotary |
| <input type="checkbox"/> OWWO | <input type="checkbox"/> Expl | <input checked="" type="checkbox"/> Wildcat | <input type="checkbox"/> Cable |

Depth to Bottom of fresh water100..... feet

Lowest usable water formationDAKOTA.....

Depth to Bottom of usable water1300..... feet

Surface pipe by Alternate : 1 2

Surface pipe to be set300'+..... feet

Conductor pipe if any required feet

Ground surface elevation feet MSL

This Authorization Expires5-20-85.....

Approved By11-20-84.....

If OWWO: old well info as follows:

Operator

Well Name

Comp Date Old Total Depth

Projected Total Depth ...4600..... feet

Projected Formation at TDMISSISSIPPI.....

Expected Producing FormationsLKC-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 ..11-20-84... Signature of Operator or Agent

W. A. Switzer

TitlePRESIDENT.....

Form C-1 4/84

MHC/KDHE 11/20/84

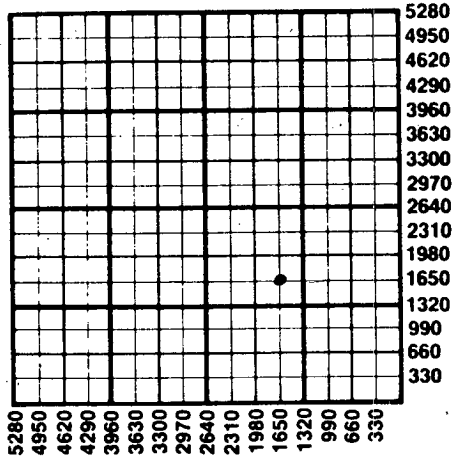
Must be filed with the K.C.C. five (5) days prior to commencing well
 This card void if drilling not started within six (6) months of date received by K.C.C.

Wichita, Kansas
 CONSERVATION DIVISION

NOV 20 1984

A Regular Section of Land
 STATE CORPORATION COMMISSION

RECEIVED
 11-20-1984



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**