

CARD MUST BE TYPED

State of Kansas  
**NOTICE OF INTENTION TO DRILL**

CARD MUST BE SIGNED

(see rules on reverse side)

Starting Date: ..... 4 ..... 9 ..... 85 .....  
month day year

API Number 15- 051-24,214-00-00

OPERATOR: License # 8035

APP NW SW SE Sec 7 Twp 14 S Rge 18  East  West  
(location)

Name Franklin Kenec

Address 1734 Colonial St. #B-1

City/State/Zip Hays, KS 67601

Contact Person Franklin Kenec

Phone (913) 625-4800

800 Ft North from Southeast Corner of Section

2310 Ft West from Southeast Corner of Section

(Note: Locate well on Section Plat on reverse side)

CONTRACTOR: License # 8804

Name All Star Drilling Inc.

City/State Same as above

Nearest lease or unit boundary line ... 380 ... feet.

County Ellis

Lease Name Sentinel Hill Well# 1

Domestic well within 330 feet:  yes  no

Municipal well within one mile:  yes  no

<b>Well Drilled For:</b>	<b>Well Class:</b>	<b>Type Equipment:</b>
<input checked="" type="checkbox"/> Oil <input type="checkbox"/> Swd	<input checked="" type="checkbox"/> Xnfield	<input checked="" type="checkbox"/> XMud Rotary
<input 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 type="checkbox"/> Wildcat	<input type="checkbox"/> Cable

Depth to Bottom of fresh water ... 125 ... feet

Lowest usable water formation ... Dakota ... feet

Depth to Bottom of usable water ... 750-600 <sup>net</sup> ... feet

Surface pipe by Alternate: 1  ~~2~~

Surface pipe to be set ... 650 ... feet

Conductor pipe if any required ... feet

Ground surface elevation ... 2721.77 ... feet MSL

This Authorization Expires 10-5-85

Approved By RCH/KCC 4-5-85

If OWWO: old well info as follows:

Operator .....

Well Name .....

Comp Date ..... Old Total Depth .....

Projected Total Depth ..... 3800 ..... feet

Projected Formation at TD ... Arbuckle .....

Expected Producing Formations Arbuckle .....

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

Date 4/5/85 Signature of Operator or Agent *Raguel Robles* Title As Agent

Form C-1 4/84

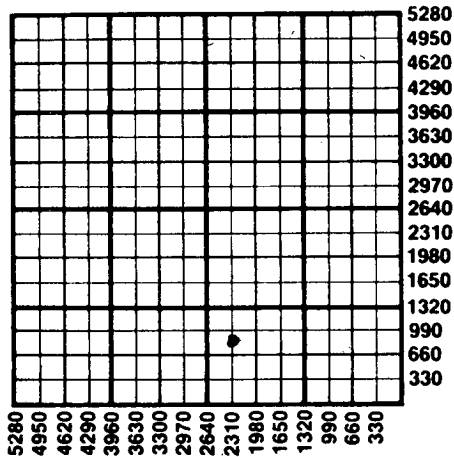
KDN-KDHE 4-5-85

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.

CONSERVATION DIVISION  
Wichita, Kansas

88-50-40  
APR 5 1985

RECEIVED  
STATE CORPORATION COMMISSION  
A Regular Section of Land



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