FORM MUST BE TYPED

| EFFECTIVE DATE: 9-20-9 | 9 | _ State of Kansas | | FORM MUST BE SIGNED |
|---|---|---|--|---|
| DISTRICT #//_ | | NOTICE OF INTENTI | ON TO DRILL | ALL BLANKS MUST BE FILLED |
| SGA?YesNo | Must be approve | d by the K.C.C. fi | ve (5) days prior to comm | encing well. |
| | 26 | • | Spot | East :32. Twp16. S, Rg28X West |
| Expected Spud Date9 | | | . , | |
| month | day | year | 865 for | et from South / XXXXX line of Section |
| OPERATOR: License # | 5135 | | 990 fe | et from XXXX (West) line of Section |
| Name: | | | IS SECTIONX REGUL | |
| Address: | | | | on the Section Plat on Reverse Side) |
| City/State/Zip: | | | | |
| Contact Person: | John O. Farmer IV | • | | TOWNSITE Well #:1 |
| Phone: | (913) 483-3144 | | Field Name:(Wildca | t)ced Field? yesX. no |
| - | | • | | |
| CONTRACTOR: License #: | | | Target Formation(s): . | Lansing |
| Name: | Shields Oil Produ | cers, Inc | | boundary:865' |
| Well Drilled For: | Well Class: Ty | pe Equipment: | | on:(est.).2782 feet MSL $ u$ |
| wett biitted roi: | wett ctass. Ty | pe Equipment. | | ll within one mile: yes no |
| .X. Oil Enh Rec | Infield .X | . Mud Rotary | Depth to bottom of free | sh water: |
| Gas Storage | | • | Depth to bottom of usal | ble water:1300' |
| OWWO Disposal | · · | . Cable | | ate: 1X. 2 |
| Seismic; # of Holes | Other | | | Planned to be set:250' |
| Other | | | | pe required:none/ |
| If OWNO: old well informati | | | Projected Total Depth: | 4600' |
| Operator: | | · | | th:Mississippi |
| Well Name: | | | Water Source for Drill | ing Operations: well farm pondX. other $ u$ |
| Comp. Date: | Utd Total Depth | • | | wett fariii pond other |
| The undersigned hereby affi et. seq. | rms that the drilling | AFFIDAY , completion and e | VIII | rell will comply comply Complete RATION COMMISSION |
| It is agreed that the follo | wing minimum require | ments will be met: | | |
| 1. Notify the appropri | ate district office | nrior to soudding | of well. | SEP ₁ 5 1994 |
| 3. The minimum amount pipe shall be set to 4. If the well is dry necessary prior to 5. The appropriate dis 6. IF AN ALTERNATE II OF SPUD DATE. IN # I hereby certify that the s | of surface pipe as sp through all unconsoli hole, an agreement plugging; strict office will be COMPLETION, PRODUCTION LLL CASES, NOTIFY DIS | ecified below shall dated materials pl between the opera notified before w DN PIPE SHALL BE CE TRICT OFFICE PRIOR n are true and to | tor and the district office tor and the district office tell is either plugged or personal tell is either plugged or personal to any cementing. TO ANY CEMENTING. the best of my knowledge and the best of my knowledge and the personal tell is | ent to the top; in all cases surface nto the underlying formation; CION ce on plug length and ptacement is production casing is cemented in; BLE WATER TO SURFACE WITHIN 120 DAYS |
| | | 01-21687 | | W |
| | Minimum surfac | required <u>WOM</u> e pipe required 2 B 9-15-97 | so feet per Alt. X (2) | 6 |
| | This authoriza | tion expires: 3- | 15-95 | , |
| | (This authoriz | ation void if dril | ling not started within | |
| | | ffective date.) Age | ent: | _ |
| <i>‡</i> | | | | 6 |
| | ile Drill Dit Annlia | REMEMBER, | TO: · with Intent to Drill; | |
| | ile Completion Form | | | 1 |
| - F | ile acreage attribut | ion plat according | to field proration orders | s; |
| | Notify appropriate di Submit plugging repor | | hours prior to workover or ugging is completed: | • |
| - 0 | btain written approv | al before disposin | ng or injecting salt water | |
| Mail to: Conservation Divi | sion, 200 Colorado D | erby Building, 202 | ? W. First St., Wichita, K | ansas 67202-1286. |

IN ALL CASES PLOT THE INTENTED WELL ON THE PLAT BELOW

PLAT OF ACREAGE ATTRIBUTABLE TO A WELL IN A PRORATED OR SPACED FIELD

If the intented well is in a prorated or spaced field, please fully complete this side of the form. If the intented well is in a prorated or spaced field complete the plat below showing that the well will be properly located in relationship to other wells producing from the common source of supply. Please show all the wells within 1 mile of the boundaries of the proposed acreage attribution unit for gas wells and within 1/2 mile of the boundaries of the proposed acreage attribution unit for oil wells.

| API NO. 15OPERATOR LEASE WELL NUMBER FIELD | | LOCATION OF WELL: COUNTY feet from south/north line of section feet from east/west line of section SECTION TWP RG |
|--|--|--|
| * | ATTRIBUTABLE TO WELL_ | IS SECTION REGULAR OF IRREGULAR IF SECTION IS IRREGULAR, LOCATE WELL FROM NEAREST |
| (Show location | of the well and shade at | CORNER BOUNDARY. Section corner used: NE NW SE SW PLAT tributable acreage for prorated or spaced wells. |
| | (Show footage to the nea | rest lease or unit boundary line.) |
| | | |
| | | |
| | | |
| | | A CONTRACTOR OF THE STATE OF TH |
| • | 32 | EXAMPLE |
| | | 1980 |
| | | 3390′ |
| | D · · · · · · · · · · · · · · · · · · · | |
| | | SEWARD CO. |

In plotting the proposed location of the well, you must show:

- The manner in which you are using the depicted plat by identifying section lines, i.e. 1 section, 1 section with 8 surrounding sections, 4 sections, etc.;
- 2) the distance of the proposed drilling location from the section's south/north and east/west; and
- 3) the distance to the nearest lease or unit boundary line.