FO	ZUM MUS	T BE	TYPE
FORM	TZUM	BE S	FICHED

EFFECTIVE DATE: 6-22	2-93	State of K	aneae	FORM MUST BE SIGNED
DISTRICT # / /		MOTICE OF INTEN		ALL BLAKKS MUST BE FILLED
SGA7. Yes No	Must be approved		(5) days prior to commencing wel	
	17	93	SW SW SW sec 7	
month	day	year		
4	intro 4			South / North line of Section
OPERATOR: License #	1 Composit		feet fro	m 5 st / West line of Section
Bankoff Oi	.i company		IS SECTION X REGULAR	IRREGULAR†
Name: Bankoff Oi Address: 155 N. Ma City/State/Zip: Wichi	irket, #1050	. <del></del>		Section Plat on Reverse Side)
City/State/Zip: Wilchi	.ta, NS 0720	<del>.</del>	County: Ness	••••••
Contact Person:Fr	ank Mize	• • • • • • • • • • • • • • • • • • • •	Lease Name:Blsagno.	Vell #:1
Phone:	10-202-2704			
	r000 /		Is this a Prorated/Spaced Fi	eld? yes X no
CONTRACTOR: License #:				rokee
Name: Duke Dril	TYUR		Nearest lease or unit bounds	ry:330!
				2340 feet MSL
Well Drilled For:	Well Class:	Type Equipment:	Vater well within one-quarter	r mile: yesX no
<b>Y</b>		<b>v</b>	Public water supply well with	nin one mile: yesX no
X. Oil Enh Rec	Infield		Depth to bottom of fresh wat Depth to bottom of usable wa	er:
Gas Storage	Pool Ext.	-	Depth to bottom of usable wa	ter:
OWWO Disposal		Cable	Surface Pipe by Alternate:	od to be set: (300) 200
Seismic; # of Hole			Length of Surface Pipe Plann	ed to be set: (
Other			Length of Conductor pipe rea	ulred: Kone
If OWNO: old well informat	· · · · · · · · · · · · · · · · · · ·		Projected Total Depth:	Micciccinnian
Operator:				Mississippian
Well Name:			Water Source for Drilling Op	
Comp. Date:	Dld Total Dept	h	DWR Permit #: contracto	ell farm pond X other or will provide
Directional, Deviated or H	orizontal <del>ve</del> llbore?	yes no	Wili Cores Be Taken7:	yes X no
If yes, true vertical dept	h:	• • • • • • • • • • • • • • • • • • • •	If yes, proposed zone:	
Bottom Hole Location				
		<u>AFFIDA</u>	<u>VIT</u>	
The undersioned became of	finne that the dell	line completion on	d eventual plugging of this well	will comply with Y e a ff
101, et. seg.	irms that the grite	ting, completion an	a eventual plugging of this well	witt compty with k.s.a. 55-
It is agreed that the foll	oving minimum requi	rements will be met	:	
	iate district offic		ef well; we posted on each drilling rig;	
			shall be set by circulating com	ent to the top; in all cases
surface pipe shall	be set through all	unconsolidated mate	rials plus a minimum of 20 feet i	nto the underlying formation;
	• •	t between the oper	ator and the district effice on	plug length and placement is
necessary prior to 5. The appropriate di		he notified before	well is either plugged er produc	tion casing is comented in-
6. IF AN ALTERNATE II	COMPLETION, PRODUCT	TION PIPE SHALL BE O	EXENTED FROM BELOW ANY USABLE WAT IR TO ANY CEMENTING.	-

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

Date: 6-15-93 Signa	ture of Operator or Agent:	Trank S.	The Titl	Exploration Mgr	
KANS	FOR KCC USE: 135	<del>/                                    </del>	<del></del>		

CONSERVATION DIVISION WICHITA, KS APORATION COMMISSION

API # 15- 135 -23762-00-00
Conductor pipe required None feet
Minimum surface pipe required 200 feet per Alt. 1 2 Approved by:
Approved by: <u>286-17-93</u>
This authorization expires: 12-17-93
(This authorization void if drilling not started within
6 months of effective date.)
Spud date: Agent:

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.

Meil to: Conservation Division, 200 Colorado Derby Building, 202 W. First St., Wichita, Kansas 67202-1286.