

FOR ECC USE:

EFFECTIVE DATE: 11-29-93

DISTRICT # 1
SEAT Yes No

Correction

CORRECTION

FORM C-1 7/91

FORM MUST BE TYPED

FORM MUST BE SIGNED

ALL BLANKS MUST BE FILLED

State of Kansas
NOTICE OF INTENTION TO DRILL

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

Expected Spud Date ... December 1, 1993
month day year

Spot W/2 SW NW Sec 29 Twp 16 S. Rg. 22 East
X West

1980' feet from South / West line of Section
330' feet from West line of Section

IS SECTION X REGULAR IRREGULAR?

(NOTE: Locate well on the Section Plat on Reverse Side)

County: Ness County
Lease Name: Musselman Well #: 1
Field Name: Unnamed

Is this a Prorated/Spaced Field? yes X no

Target Formation(s): Mississippi

Nearest lease or unit boundary: 330'

Ground Surface Elevation: NA feet MSL

Water well within one-quarter mile: X yes no

Public water supply well within one mile: yes X no

Depth to bottom of fresh water: 70'

Depth to bottom of usable water: 790'

Surface Pipe by Alternate: 1 X 2

Length of Surface Pipe Planned to be set: 200'

Length of Conductor pipe required: none

Projected Total Depth: 4500'

Formation at Total Depth: Mississippi

Water Source for Drilling Operations:

... well X farm pond other

DWR Permit #: _____

Will Cores Be Taken? yes X no

If yes, proposed zone: RECEIVED

KANSAS CORPORATION COMMISSION

Well Drilled For: Well Class: Type Equipment:
X Oil ... Enh Rec X Infield X Mud Rotary
... Gas ... Storage ... Pool Ext. ... Air Rotary
... OMAO ... Disposal ... Wildcat ... Cable
... Seismic; ... # of Holes ... Other

If OMAO: old well information as follows:

Operator: _____
Well Name: _____
Comp. Date: _____ Old Total Depth _____

Directional, Deviated or Horizontal wellbore? yes X no

If yes, true vertical depth: _____

Bottom Hole Location: _____

X Was #15077-21275

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. Notify the appropriate district office prior to spudding of well;
2. A copy of the approved notice of intent to drill shall be posted on each drilling rig;
3. The minimum amount of surface pipe as specified below 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;
4. If the well is dry hole, an agreement between the operator and the district office on plug length and placement is necessary prior to plugging;
5. The appropriate district office will be notified before well is either plugged or production casing is cemented in;
6. 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: 11-24-93 Signature of Operator or Agent: *Daniel M. Reynolds* Title: Vice President

NOV 24 1993
11-24-1993
CONSERVATION DIVISION
WICHITA, KS

X WAS 1980 F.S.L.
X IS 1980 F.K.L.

FOR ECC USE: #15-135-23798-00-00
 API # 15- _____
 Conductor pipe required None feet
 Minimum surface pipe required 200' feet per Alt. 1 (2)
 Approved by: CB 11-24-93
 This authorization expires: 5-24-94
 (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 ACD-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.

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

29
16
22

IN ALL CASES PLOT THE INTENDED WELL ON THE PLAT BELOW
PLAT OF ACREAGE ATTRIBUTABLE TO A WELL IN A PRORATED OR SPACED FIELD

If the intended well is in a prorated or spaced field, please fully complete this side of the form. If the intended 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. 15- _____
 OPERATOR _____
 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 _____

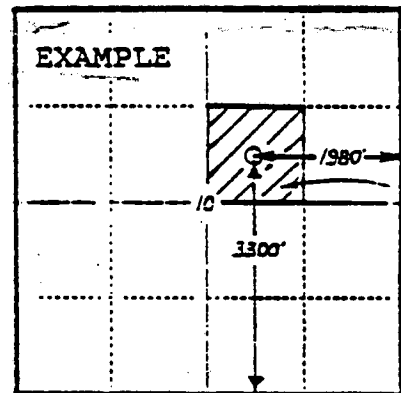
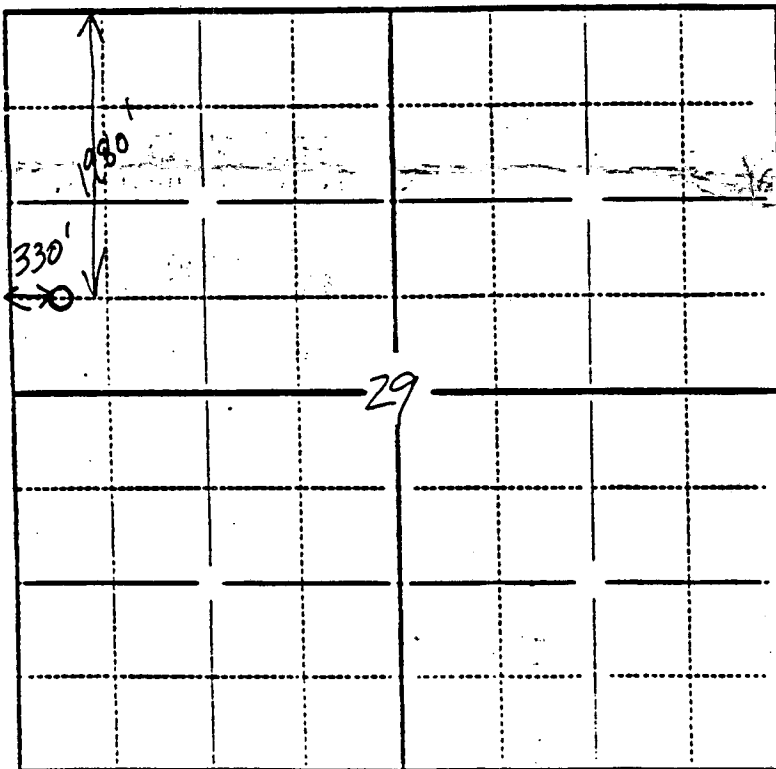
NUMBER OF ACRES ATTRIBUTABLE TO WELL _____
 QTR/QTR/QTR OF ACREAGE _____

IS SECTION _____ REGULAR or _____ IRREGULAR
IF SECTION IS IRREGULAR, LOCATE WELL FROM NEAREST CORNER BOUNDARY.

Section corner used: _____ NE _____ NW _____ SE _____ SW

PLAT

(Show location of the well and shade attributable acreage for prorated or spaced wells.)
 (Show footage to the nearest lease or unit boundary line.)



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. 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 lines; and
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Formation at Total Depth: Mississippi

Water Source for Drilling Operations:

... well farm pond other

DWR Permit #: _____

Will Cores Be Taken? ... yes no

If yes, proposed zone: **RECEIVED**

KANSAS CORPORATION COMMISSION

| Well Drilled For: | Well Class: | Type | Equipment: |
|---|----------------|---|--|
| <input checked="" type="checkbox"/> Oil | ... Enh Rec | <input checked="" type="checkbox"/> Infield | <input checked="" type="checkbox"/> Mud Rotary |
| ... Gas | ... Storage | ... Pool Ext. | ... Air Rotary |
| ... OWMO | ... Disposal | ... Wildcat | ... Cable |
| ... Seismic | ... # of Holes | ... Other | |
| ... Other | | | |

If OWMO: old well information as follows:

Operator: _____

Well Name: _____

Comp. Date: _____ Old Total Depth _____

Directional, Deviated or Horizontal wellbore? ... yes no

If yes, true vertical depth: _____

Bottom Hole Location: _____

AFFIDAVIT

NOV 24 1993
11-24-1993
CONSERVATION DIVISION
WICHITA, KS

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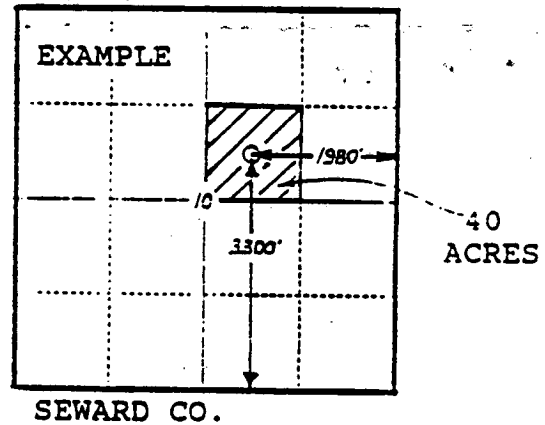
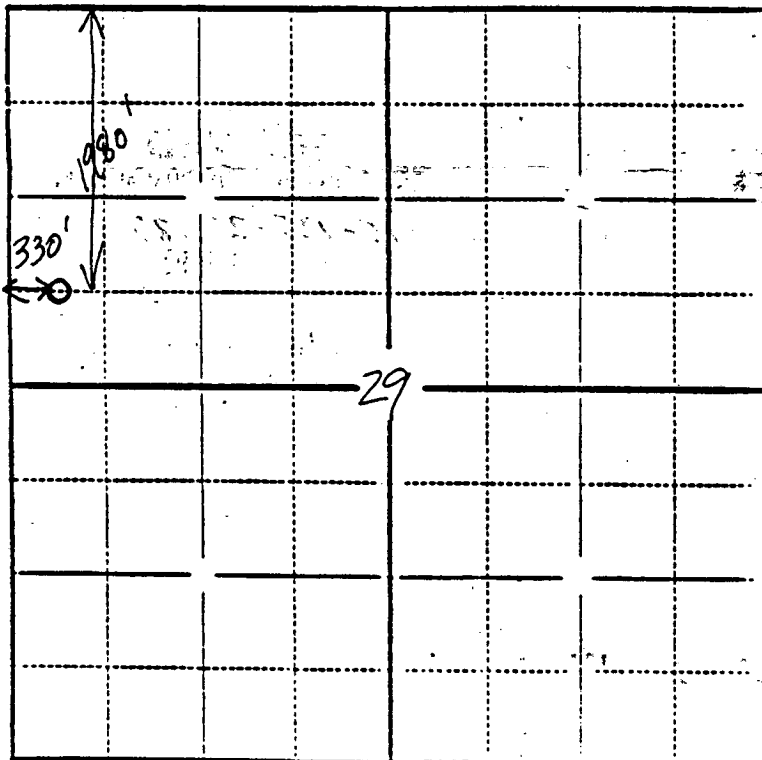
API NO. 15- _____
 OPERATOR _____ LOCATION OF WELL: COUNTY _____
 LEASE _____ feet from south/north line of section _____
 WELL NUMBER _____ feet from east/west line of section _____
 FIELD _____ SECTION _____ TWP _____ RG _____

NUMBER OF ACRES ATTRIBUTABLE TO WELL _____ IS SECTION _____ REGULAR or _____ IRREGULAR
 QTR/QTR/QTR OF ACREAGE _____ - _____ - _____ **IF SECTION IS IRREGULAR, LOCATE WELL FROM NEAREST CORNER BOUNDARY.**

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