State of Kansas NOTICE OF INTENTION TO DRILL

FORM MUST BE SIGHED ALL BLANKS MUST BE FILLED

09/05/89	## 25 East S/2 NW. NE. Sec 06: Twp 17. S, Rg 20 X West
Expected Spud Date	West Sec Two S, Rg X West
month day year	## ## ## ## ## ## ## ## ## ## ## ## ##
-00.3	
OPERATOR: License # +514005 MANAGEMENT TAIC	
OPERATOR: JAMES ENERGY MANAGEMENT INC.	(Note: Locate well on Section Plat Below)
Address: 44 INVERNESS BLDG. A SUITE A.	N. T. C.
City/State/Zip: ENGLEWOOD CO. 80112	County: NESS
Contact Person: JAMES WECHTOR	Lease Name: HOPKINS Well #:#2
Phone: (303) 797-0411	Field Name:WILDEAT. ARNOLD SW
	Is this a Prorated Field? yes XX. no
CONTRACTOR: License #:4083	Target Formation(s):MISSISSIPPI
Name: WESTERN KANSAS DRILLING	Nearest lease or unit boundary:11.35
	Ground Surface Elevation:2558 feet MSL
Well Drilled For: Well Class: Type Equipment:	Domestic well within 330 feet: yes X.X. no
	Municipal well within one mile: yes, X.X. no
XX Oil Inj Infield XX Mud Rotary	Depth to bottom of fresh water:180/
Gas Storage Pool Ext Air Rotary	Depth to bottom of usable water:
OMMO Disposal XX Wildcat Cable	Surface Pipe by Alternate: 1 X.X. 2
Seismic; # of Holes	Length of Surface Pipe Planned to be set:200
,	Length of Conductor pipe required:
If OWNO: old well information as follows:	Projected Total Depth:4550
Operator:	Formation at Total Depth:
Well Name:	Water Source for Drilling Operations:
Comp. Date: Old Total Depth	well farm pond χ.χ. other
	DWR Permit #:
Directional, Deviated or Horizontal wellbore? yes x.x. no	Will Cores Be Taken?: yes x.x. no
If yes, total depth location:	If yes, proposed zone:
	The second secon
AFFIDAVI	<u>T</u>
The undersigned hereby affirms that the drilling, completion and ev	control plugging of this well will comply with Y S A 55,101
the dimersigned hereby artiting that the directing, completion and ex	
et. seg.	rentual plugging of this well with comply with k.s.k. 35-101,
et. seq. It is agreed that the following minimum requirements will be met:	
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