FORM NUST BE TYPED FORM NUST BE TYPED

State of Kansas

FORM MUST BE SIGNED
ALL RLANKS MUST BE FILLED

10.01.01.4770	Must be empressed		Es deve seite se comme	ALL BLANKS MUST BE FIT	LLED	
	must be approve	o by the k.C.C. five	(5) days prior to commend		Truck	
Expected Spud DateJanua	ry 12	1990	SW NW SE	$\stackrel{ ext{XXXX}}{\overset{ ext{C}}{\overset{ ext{C}}}{\overset{ ext{C}}{\overset{ ext{C}}}{\overset{ ext{C}}{\overset{ ext{C}}}{\overset{ ext{C}}{\overset{ ext{C}}}{\overset{ ext{C}}{\overset{ ext{C}}}{\overset{ ext{C}}{\overset{ ext{C}}{\overset{ ext{C}}{\overset{ ext{C}}{\overset{ ext{C}}{\overset{ ext{C}}{\overset{ ext{C}}}{\overset{ ext{C}}}{\overset{ ext{C}}}{\overset{ ext{C}}}{\overset{ ext{C}}}{\overset{ ext{C}}}{\overset{ ext{C}}}}{\overset{ ext{C}}}{\overset{ ext{C}}}{\overset{ ext{C}}}{\overset{ ext{C}}{\overset{ ext{C}}}{\overset{ ext{C}}}{}}{\overset{ ext{C}}}}{\overset{ ext{C}}}{\overset{ ext{C}}}{\overset{ ext{C}}}{\overset{ ext{C}}}{$	Lloct	
•	day	* 1			wes t	
			1650	feet from South Line of Soc	+ i = +	
OPERATOR: License # 5027			2310	feet from South line of Sec feet from East line of Sect	ion	
Name:J. A. ALLIS	ON			l on Section Plat on Reverse Side		
Address: 300 West Do	uglas, Suit	e 305	(motos tobate wet	, on occuran Frat on Reverse 3106	,	
City/State/Zip: Wichita			County: RUSH		/	
Contact Person: J. A			Lesse Name OBORNY			
Phone: 316-263-2241						
		/	Is this a Prorated Field? yes X no			
CONTRACTOR: License #: 51	.22		Target Formation(s):	.Arbuckle	1	
CONTRACTOR: License #: 5122 Name: Woodman-Iannitti Drilling Co.				boundary:330!		
				ion:1984!(Est)eet	 MSi ✓	
Well Drilled For:	Well Class:	Type Equipment:		330 feet: yes .X. no	1136	
		,,,,		one mile: yes .X. no	,	
X. 0it Inj	.X. Infield	.X Mud Rotary	Depth to bottom of fr	esh water: 250 150	//	
Gas Storage		Air Rotary	Depth to bottom of us	sable water: 459' 550		
OWWO Disposal		•	Surface Pipe by Alternate: X. 1 2			
Seismic; # of Holes			Length of Surface Pipe Planned to be set:1184!			
•				oipe required:None		
If OWNO: old well information as follows:			Projected Total Depth:			
Operator:			Formation at Total Depth:Arbuckle			
Well Name:			Water Source for Drilling Operations:			
Comp. Date:	Old Total De	pth		well farm pond .X. ot	ther 🗸	
•		J	DWR Permit #:			
Directional, Deviated or Hor	izontal wellbor	e? yes ች no	Will Cores Be Taken?:	yes X. no		
If yes, total depth location		• • • • • • • • • • • • • • • • • • • •				
		<u>AFFIDAV</u>	<u>'IT</u>			
The undersigned hereby affire	ms that the dril	line completion and a	wontunt plugging of this	well will comply with K.S.A. 55-1	• • •	
et. seq.	is that the diff	ting, completion and e	ventual plugging of this	wett witt compty with k.S.A. 55-1	101,	
It is agreed that the follow	ing minimum requ	uirements will be met:				
1. The appropriate dist	rict office shal	ll be notified before	setting surface pipe;			
pipe shall be set th	r surtace pipe as couch all uncon	s specified above shall solidated materials of	. De set by circulating co	ement to the top; in all cases surfine into the underlying formation;	face	
3. If the well is dry,	a plugging prop	osal shall be submitte	d to the district office	. An agreement between the opera	ator	
and the district off	ice on plug leng	gth and placement is n	ecessary prior to pluggi	ng;		
4. The appropriate dist	rict office will	l be notified before w	ell is either plugged or	production casing is demented in	١;	
of spud date. In al	l cases, notify	district office prior	mented from below any usa to any cementing.	able water to surface within 120 d	iays	
I hereby certify that the st	atements made ho	erein are true and to	the best of my knowledge	and belief.		
Date: Dec. 18. 1990 sig			VIIII Jens			
pare: pacs.tv.,	mature of operat	tor or agent	Allison	. TitleOperator		
	FOR KCC US		ATTISOII	1		
		11 2 11 211	2-222			
	API # 15	· · · · · · · · · · · · · · · · · · ·	<u>3-ccc</u>		D.	
		feet 70 feet per Alt.	RECEIVED			
	Approved by	: MW 1-3-	97	STATE CORPORATION COMMISSION	17	
	EFFECTIVE C	ر ATE:	9/ 221			
		rization expirés:	1-1-21	DEC 1 9 1990		
		orization void it drit of effective date.)	ling not started within	1 2 =	/	
		Age	nt:	12-19-98 CONSERVATION DIVISION	0	
	1			I COMMENAUTION DIAIONA		

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.

18 W

Wichita, Kansas

PLAT OF ACREAGE ATTRIBUTABLE TO A WELL

State Corporation Commission, Conservation Division 200 Colorado Derby Bidg. Wichita, Kansas 67202

OPERATORA_ALLISON		
DEASE ORORNY	LOCATION OF WELL:	
WELL NUMBER #7	<u> </u>	
FIELD Rudi	2310	feet north of SE corner
	SW NW SESec	feet west of SE corner
NO. OF ACRES ATTRACTOR	COUNTY	24 T 18 R 18 XX/W
NO. OF ACRES ATTRIBUTABLE TO WELL 10	IS SECTION	RUSH
	TE TRANSCES	REGULAR IRREGULAR?
DESCRIPTION OF ACREAGE SE/4		[J.] [J. [J. [J. [L.]]] P. [J. [J. [A. A. A
NOTE: If plat depicted is insufficient your own scaled or surveyed plat	for your circum	stances, you may attach
23	300	18 18s
In plotting the proposed location of the welt, you must	<u> </u>	↑ 30
1) The marrow to 11.1	snow:	
section with a	Mint has talen as a	
 The mainer in which you are using the depicted precision with 8 surrounding partial sections, 4 at the wealth tention and at 	rat by identifying sec	tion lines, i.e. 'section'
the well's location relative to the location of a supply in adjoining drilling units, pursuant to K.	•	,
 the distance of the proposed drilling location in the distance to the prepare leave 	om the access	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
test test of unit bornes	· 12	
nereby certify that the statements made herein are true	and to the lines as	Samuel A
	The best of my	Knowledge and bettef
Date Dec. 18, 1990 J. A. Allison Operator		