

CARD MUST BE TYPED

State of Kansas  
**NOTICE OF INTENTION TO DRILL**  
(see rules on reverse side)

CARD MUST BE SIGNED

Starting Date: ..... 4-3-85 .....  
month day year

API Number 15- 101-21,151.0000  East

OPERATOR: License # ..... 5422 .....

..... NW/4 .. Sec . 3 . Twp . 17 S, Rge 29 .  West  
(location)

Name ... Abercrombie Drilling, Inc. ....

Address . 801 Union Center .....

City/State/Zip .. Wichita, KS .. 67202 .....

Contact Person Jack L. Partridge .....

Phone ..... 316-262-1841 .....

..... 3830 .....

..... 5130 .....

(Note: Locate well on Section Plat on reverse side)

CONTRACTOR: License # ..... 5422 .....

Name ... Abercrombie Drilling, Inc. ....

City/State .. Wichita, KS .....

Nearest lease or unit boundary line ..... 150 .....

County ..... Lane .....

Lease Name Munsell .....

Domestic well within 330 feet :  yes  no

Municipal well within one mile :  yes  no

<b>Well Drilled For:</b>	<b>Well Class:</b>	<b>Type Equipment:</b>
<input type="checkbox"/> Oil <input checked="" type="checkbox"/> Swd	<input type="checkbox"/> Infield	<input type="checkbox"/> Mud Rotary
<input type="checkbox"/> Gas <input type="checkbox"/> Inj	<input type="checkbox"/> Pool Ext.	<input type="checkbox"/> Air Rotary
<input type="checkbox"/> OWWO <input type="checkbox"/> Expl	<input type="checkbox"/> Wildcat	<input type="checkbox"/> Cable

Depth to Bottom of fresh water ..... 100 165 <sup>at HC</sup> ..... feet

Lowest usable water formation ..... Dakota .....

Depth to Bottom of usable water ..... 950 1100 ..... feet

Surface pipe by Alternate : 1  2

Surface pipe to be set ..... 350 ..... feet

Conductor pipe if any required ..... None .....

Ground surface elevation ..... feet MSL

This Authorization Expires ..... 9-22-85 .....

Approved By ..... 3-22-85 .....

If OWWO: old well info as follows:

Operator .....

Well Name .....

Comp Date ..... Old Total Depth .....

Projected Total Depth ..... 2220 ..... feet

Projected Formation at TD ... Arbuckle .....

Expected Producing Formations ... None .....

I certify that we will comply with K.S.A. 55-101, et seq., plus eventually plugging hole to K.C.C. specifications.

Date .. 3-21-85 ..... Signature of Operator or Agent

*Jerry A. Langrehr*  
Jerry A. Langrehr

Exec. V. P. Abercrombie Drlg.

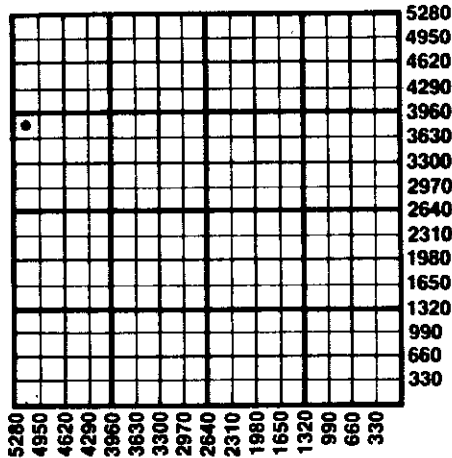
MHC/ADHE 3-22-85

Must be filed with the K.C.C. five (5) days prior to commencing well  
This card void if drilling not started within six (6) months of date received by K.C.C.

CONSERVATION DIVISION  
Wichita, Kansas

MAR 22 1985

RECEIVED  
STATE CORPORATION COMMISSION  
MAR 22 1985  
A Regular Section of Land



**Important procedures to follow :**

1. Notify District office before setting surface casing.
2. Set surface casing by circulating cement to the top.
3. File completion forms ACO-1 with K.C.C. within 90 days of well completion, following instructions on ACO-1, side 1, and including copies of wireline logs.
4. Notify District office 48 hours prior to old well workover or re-entry.
5. Prior to plugging, prepare a plugging plan, then obtain agreement from the appropriate district office for an approved plugging plan.
6. Submit plugging report (CP-4) to K.C.C. after plugging is completed.
7. Obtain an approved injection docket number before disposing of salt water.
8. Notify K.C.C. within 10 days when injection commences or terminates.
9. If an alternate 2 completion, cement in the production pipe from below any usable water to surface within 120 days of spud date.

State Corporation Commission of Kansas  
Conservation Division  
200 Colorado Derby Building  
Wichita, Kansas 67202  
(316) 263-3238