FORM MUST BE TYPED FORM C-1 12/88

State of Kansas NOTICE OF INTENTION TO DRILL

FORM MUST BE SIGNED ALL BLANKS MUST BE FILLED

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

			2, 1 112		East	
Expected Spud Date	July	.21	1989	釆	NW NW SW Sec2. Twp .16. s, Rg .26 x West	
•	month	day	year			
	•				.2310 feet from South line of Section	
OPERATOR: License #	30063			*	.4950 feet from East line of Section	
Name: Wests	star Resour	ces			(Note: Locate well on Section Plat Below)	
City/State/Zip: .	Manhattan.	KS 665	02		County: .Ness	
					Lease Name:Williamson Well #:1	
Phone:(913)	-625 - 5891				Field Name:Unknown	
					Is this a Prorated Field? yesx no	
CONTRACTOR: Licens					Target Formation(s): Mississippi	
Name: Emphasi	is Oil Opera	ations			Nearest lease or unit boundary:330	
					Ground Surface Elevation: . Est 2570 feet MSL	
Well Drilled For:	Well	Class:	Type Equipment:		Domestic well within 330 feet: yes X. no	
					Municipal well within one mile: yes 🗓 no	
.X. 0il Ir	njX	Infield	¥ Mud Rotary		Depth to bottom of fresh water:200	
Gas St	torage	Pool Ext.	Air Rotary		Depth to bottom of usable water: .1200!	
OM/O Di	isposal	Wildcat	Cable		Surface Pipe by Alternate: 1x. 2	
Seismic; #	of Holes				Length of Surface Pipe Planned to be set: $240\pm$	
					Length of Conductor pipe required:N.∕.A	
If OWNO: old well i					Projected Total Depth: .4600'	
Operator:					Formation at Total Depth: .Mississippi	
Well Name:	• • • • • • • • • • • • • • • • • • • •				Water Source for Drilling Operations:	
Comp. Date:	Old	d Total Dep	th		wellX farm pond other	
•					DWR Permit #:	
Directional, Deviat	ted or Horizonta	al wellbore	? ves .X. no		Will Cores Be Taken?: yes\tilde{X}. no	
		• • • • • • • • • • • • • • • • • • • •			If yes, proposed zone:	
		• • • • • • • • • • • • • • • • • • • •	••••••			
WAS: Nw-Nw		• • • • • • • • • • • • • • • • • • • •		TIVAC		
WAS: NW-NW	-se; 2310	/ PEL	<u>AFF11</u>			
The undersigned heret. seq.	-Se; 2310 reby affirms tha	FEL	AFFII	d eve		
The undersigned her et. seq. It is agreed that to	-Se; 2310 reby affirms tha the following mi	FEL.	AFFII ing, completion and	d eve	ntual plugging of this well will comply with K.S.A. 55-101,	
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Submit plugging report (CP-4) after plugging is completed;
Obtain written approval before disposing or injecting salt water.