

FOR KCC USE:

\*\*CORRECTION\*\*

FORM C-1 7/91

FORM MUST BE TYPED

FORM MUST BE SIGNED

ALL BLANKS MUST BE FILLED

EFFECTIVE DATE: 5-18-97  
DISTRICT # R  
SGA? X Yes... No

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 May 17, 1997  
month day year

Spot 200'S & 100'W of East  
C NW NW Sec 22 Twp 31S S, Rg 7W West

OPERATOR: License # 6236  
Name: MTM. PETROLEUM, INC.  
Address: P.O. Box 82  
City/State/Zip: Spivey, Kansas 67142-0082  
Contact Person: Marvin Miller  
Phone: 316/532-5178

860 feet from South North line of Section  
560 feet from East West line of Section  
IS SECTION X REGULAR IRREGULAR

(NOTE: Locate well on the Section Plat on Reverse Side)  
County: Harper  
Lease Name: BURKHOLDER Well #: 1-22  
Field Name: \_\_\_\_\_  
Is this a Prorated/Spaced Field? yes X no  
Target Formation(s): Miss  
Nearest lease or unit boundary: 560'  
Ground Surface Elevation: 1540' feet MSL  
Water well within one-quarter mile: yes X no  
Public water supply well within one mile: yes X no  
Depth to bottom of fresh water: 80'  
Depth to bottom of usable water: 180'  
Surface Pipe by Alternate: X 1 2  
Length of Surface Pipe Planned to be set: 200'  
Length of Conductor pipe required: N/A  
Projected Total Depth: 4800'  
Formation at Total Depth: Mississippi  
Water Source for Drilling Operations:  
X well      farm pond      other

CONTRACTOR: License #: 5929  
Name: DUKE DRILLING CO., INC.

Well Drilled For: Well Class: Type Equipment:

X. Oil ... Enh Rec X. Infield X. Mud Rotary  
... Gas ... Storage ... Pool Ext. ... Air Rotary  
... OAWO ... Disposal ... Wildcat ... Cable  
... Seismic; ... # of Holes ... Other  
... Other

If OAWO: 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: \_\_\_\_\_

Will Cores Be Taken?: yes X no  
If yes, proposed zone: \_\_\_\_\_

AFFIDAVIT

RECEIVED

KANSAS CORPORATION COMMISSION

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.

MAY 15 1997  
05-15-199  
CONSERVATION DIVISION  
WICHITA, KS

I hereby certify that the statements made herein are true and to the best of my knowledge and belief.

Date: May 14, 1997 Signature of Operator or Agent: Dale J. Myers Title: \_\_\_\_\_ Agent

WAS: 760' FNL  
IS: 870' FNL

SPOT WAS: 100'W & 100'S  
OF NW NW

FOR KCC USE: 077-21,325-0000  
API # 15- \_\_\_\_\_  
Conductor pipe required NONE feet  
Minimum surface pipe required 200 feet per Alt. (1) X  
Approved by: JK 5-19-97 / DRUG 5-13-97  
This authorization expires: 11-13-97  
(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 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.

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202.

82  
31  
74

**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 \_\_\_\_\_

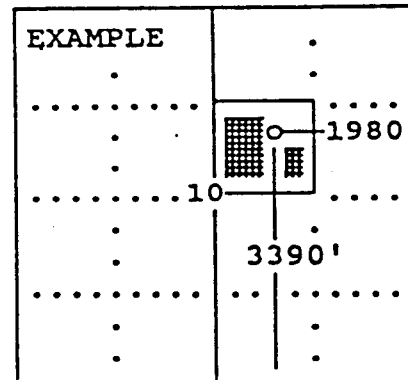
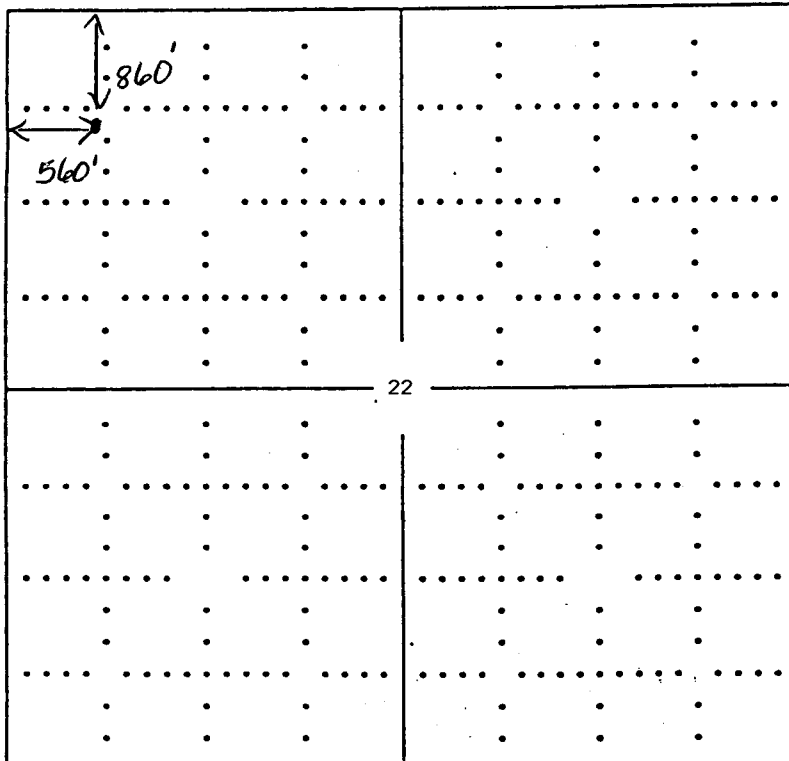
NUMBER OF ACRES ATTRIBUTABLE TO WELL \_\_\_\_\_  
 QTR/QTR/QTR OF ACREAGE \_\_\_\_\_

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.)



SEWARD CO.

HARPER COUNTY

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; and
- 3) the distance to the nearest lease or unit boundary line.

FOR KCC USE:

FORM C-1 7/91

FORM MUST BE TYPED

FORM MUST BE SIGNED

ALL BLANKS MUST BE FILLED

EFFECTIVE DATE: 5-18-97

State of Kansas

DISTRICT # 7

NOTICE OF INTENTION TO DRILL

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

SGA?  Yes  No

Expected Spud Date May 12, 1997  
month day year

Spot 100' W & 100' S OF NW NW Sec 22 Twp 31S Rg 7W East West

OPERATOR: License # 6236  
Name: MTM PETROLEUM, INC.  
Address: P. O. Box 82  
City/State/Zip: Spivey, Kansas 67142-0082  
Contact Person: Marvin Miller  
Phone: 316/532-5178

700' feet from South (North) line of Section  
560' feet from East (West) line of Section  
IS SECTION  REGULAR  IRREGULAR?

CONTRACTOR: License # 5929  
Name: DUKE DRILLING CO., INC.

(NOTE: Locate well on the Section Plat on Reverse Side)  
County: Harper  
Lease Name: BURKHOLDER Well #: 1-22

Well Drilled For: Well Class: Type Equipment:

- |   |                                     |   |  |
|---|-------------------------------------|---|--|
| <input checked="" type="checkbox"/> Oil | <input type="checkbox"/> Enh Rec    | <input checked="" type="checkbox"/> Infield | <input checked="" type="checkbox"/> Mud Rotary |
| <input type="checkbox"/> Gas            | <input type="checkbox"/> Storage    | <input type="checkbox"/> Pool Ext.          | <input type="checkbox"/> Air Rotary            |
| <input type="checkbox"/> OWWO           | <input type="checkbox"/> Disposal   | <input type="checkbox"/> Wildcat            | <input type="checkbox"/> Cable                 |
| <input type="checkbox"/> Seismic;       | <input type="checkbox"/> # of Holes | <input type="checkbox"/> Other              |  |

Field Name: \_\_\_\_\_  
Is this a Prorated/Spaced Field? .... yes  no

If OWWO: old well information as follows:

Operator: \_\_\_\_\_  
Well Name: \_\_\_\_\_  
Comp. Date: \_\_\_\_\_ Old Total Depth \_\_\_\_\_

Target Formation(s): Miss.  
Nearest lease or unit boundary: 330' 560'  
Ground Surface Elevation: \_\_\_\_\_ feet MSL

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

If yes, true vertical depth: \_\_\_\_\_  
Bottom Hole Location: \_\_\_\_\_

Water well within one-quarter mile: .... yes  no  
Public water supply well within one mile: .... yes  no

Depth to bottom of fresh water: 80'  
Depth to bottom of usable water: 180'

Surface Pipe by Alternate:  1' 200'  
Length of Surface Pipe Planned to be set: \_\_\_\_\_

Length of Conductor pipe required: N/A  
Projected Total Depth: 4800'

Formation at Total Depth: Mississippi  
Water Source for Drilling Operations:  
 well .... farm pond .... other

Will Cores Be Taken?: .... yes  no  
If yes, proposed zone: \_\_\_\_\_

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:

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RECEIVED  
KANSAS CORPORATION COMMISSION  
MAY 01 1997  
05-01-1997

I hereby certify that the statements made herein are true and to the best of my knowledge and belief.

Date: 4/30/97 Signature of Operator or Agent: Jerry R. Rogers Title: Agent

FOR KCC USE:  
 API # 15- 077-713750000  
 Conductor pipe required NONE feet  
 Minimum surface pipe required 200' feet per Alt.  X  
 Approved by: JK 5-13-97  
 This authorization expires: 11-13-97  
 (This authorization void if drilling not started within 6 months of effective date.)  
 Spud date: \_\_\_\_\_ Agent: \_\_\_\_\_

REMEMBER TO:

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Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202.

CORRECTION 5-19-97 JK

22  
31  
700

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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.**

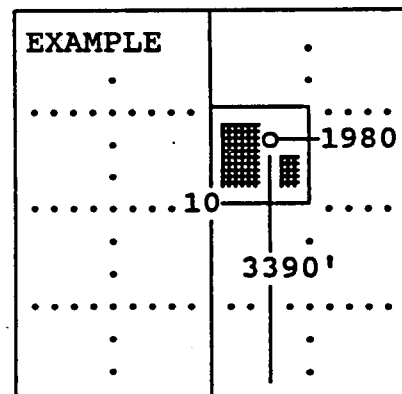
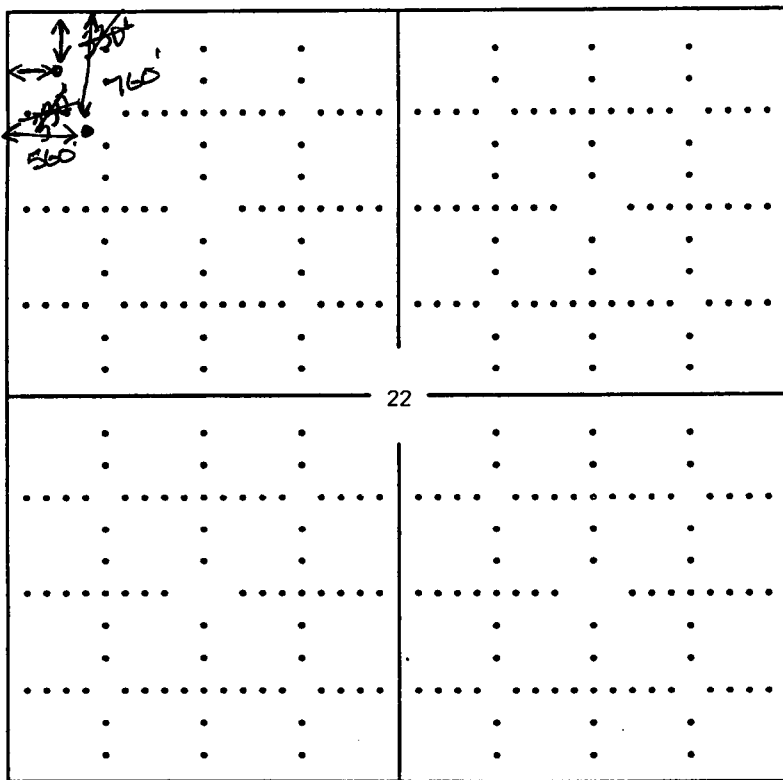
Section corner used: \_\_\_\_\_ NE \_\_\_\_\_ NW \_\_\_\_\_ SE \_\_\_\_\_ SW

**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.)

*MOVED LOCATION  
 760' FULL  
 560' FULL*



SEWARD CO.

HARPER COUNTY

**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.;
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