| For KCC Use:    | 10-11-2000 |  |  |  |
|-----------------|------------|--|--|--|
| Effective Date: | 10-11-2000 |  |  |  |
| District #      |            |  |  |  |
| SGA? Tyes       | No         |  |  |  |

## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

# NOTICE OF INTENT TO DRILL

Must be approved by KCC five (5) days prior to commencing well

Form C-1 September 1999 Form must be Typed Form must be Signed All blanks must be Filled

| Expected Spud Date                            | 10                  | 10                    | 00                                    | Spot                                     |  |                         |  |                                | East                                  |
|---|---------------------|-----------------------|---------------------------------------|--|--|-------------------------|--|--------------------------------|---------------------------------------|
| Expected Opad Dato                            | month               | day                   | year                                  |  | <u>NW</u> - <u>SE</u>                  | ean 25 -                | Tura 16 e.p.                               | 26                             | <del></del>                           |
|   | 201                 | 7.4.0                 |                                       | / /                                      |  |                         | S / N (circle o                            |                                |                                       |
| OPERATOR: License#                            | mino Petro          | 742                   | Inc.                                  |  | 1650                                   | feet from               | E / W (circle o                            | ne) Line of                    | Section                               |
| 1101110.                                      |                     |                       |                                       | Is SEC                                   | TION X Regu                            | ular Irred              | ular?                                      | mo, Emo o                      | Occilor:                              |
| Address: 4924                                 |                     |                       |                                       |  | •                                      |                         |  |                                |                                       |
| City/State/Zip: Newt                          |                     |                       |                                       |  | •                                      |                         | tion Plat on revers                        | e side)                        |                                       |
| (21)  | 799-1000            |                       |                                       |  | y:Ba<br>Name:Ba                        |                         | SS   |                                | 2                                     |
| Phone: (316                                   | 799-100             |                       |                                       |  | Name:Do                                |                         | W  | /ell #:                        |                                       |
| CONTRACTOR: License#-                         |                     | 5123                  | · · · · · · · · · · · · · · · · · · · | /  | a Prorated / Space                     |                         | <u> </u>                                   |                                | X No                                  |
|   | Drilling (          | Company               | , Inc.                                |  | Information(s):                        |                         | Hee!                                       | tes                            | ANO                                   |
|   |                     |                       |                                       |  | information(s):<br>it Lease or unit bo |                         |  | 30                             |                                       |
| Well Drilled For:                             | Well Class:         | Type                  | Equipment:                            |  | d Surface Elevation                    |                         |  |                                | eet MSL                               |
| X Oil Enh Rec                                 | X Infield           | X                     | Mud Rotary                            |  | well within one-qua                    |                         |  |                                | X No                                  |
| ☐ Gas ☐ Storage                               | Pool Ext            | t. 🔲 1                | Air Rotary                            |  | water supply well v                    |                         | •  |                                | XNo                                   |
| OWWO Disposal                                 | Wildcat             |                       | Cable                                 |  | to bottom of fresh                     |                         | 200  |                                |                                       |
| Seismic;# of Ho                               | oles 🔲 Other        |                       |                                       | •  | to bottom of usable                    |                         | 1150                                       |                                |                                       |
| Other   |                     |                       |                                       |  | e Pipe by Alternate                    |                         |  |                                |                                       |
|   |                     |                       |                                       |  | of Surface Pipe F                      |                         | 222  | <b>⊦</b> ,                     | /                                     |
| If OWWO: old well information                 |                     |                       |                                       | •  | of Conductor Pipe                      |                         |  |                                |                                       |
| Operator:                                     |                     |                       |                                       |  | ed Total Depth:                        | •                       |  |                                |                                       |
| Well Name:                                    |                     |                       |                                       | <del></del>                              | ing Formation Tar                      |                         |  | S                              |                                       |
| Original Completion Date:                     | ·                   | original lota         | I Depth:                              | <del></del> ,                            | Source for Drilling                    | •                       |  |                                |                                       |
| Directional, Deviated or Horiz                | ontal wellbore?     |                       | Yes X                                 |  | Well Fai                               |                         | Other                                      | x /                            | ,                                     |
| If Yes, true vertical depth:                  |                     |                       |                                       |  | Permit #:                              |                         |  |                                |                                       |
| Bottom Hole Location:                         |                     |                       |                                       | _  |  | a: Apply for Permi      | t with DWR                                 |                                |                                       |
| KCC DKT #:                                    |                     |                       |                                       | — Will Co                                | res be taken?                          |                         | ,  | Yes                            | XNo                                   |
|   |                     |                       |                                       | If Yes,                                  | proposed zone:                         |                         |  |                                |                                       |
| The undersigned hereby affil                  |                     |                       | etion and event                       | AFFIDAVIT ual plugging of                | this well will comp                    | STA<br>ly with K.S.A. 5 | RECEIV<br>TE CORPORATIO<br>5-101, et. seq. | IED<br>NI COMMISS              | SION                                  |
| It is agreed that the following               | minimum requi       | irements w            | ill be met:                           |  |  |                         | OCT 6                                      | 2000                           |                                       |
| 1. Notify the appropriate                     |                     |                       |                                       |  |  |                         | ص- 10                                      | .00                            |                                       |
| 2. A copy of the approved                     | d notice of inten   | nt to drill <b>s/</b> | nall be posted o                      | n each drilling i                        | ig;                                    |                         | 10-0                                       | IN DIVISION                    | ì.                                    |
| The minimum amount through all unconsolidates | of surface pipe     | as specific           | ed below <i>shall t</i>               | <b>ne set</b> by circulate the undertain | ating cement to th                     | e top; in all cas       | es/surtace/pipe<br>Vichita. I              | i' <b>shali be</b> :<br>Kansas | set                                   |
| 4. If the well is dry hole.                   | area marenare h     | una a mem             | 114111 OI 20 1861 II                  | no the ondeny                            | ng jormanon.                           |                         | *************                              |                                |                                       |
| 5. The appropriate distric                    | •                   |                       | •                                     |  |  | •                       | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,    |                                | · · · · · · · · · · · · · · · · · · · |
| 6. If an ALTERNATE II C                       |                     |                       | •                                     |  | elow any usable w                      | ater to surface         | within 120 day                             | s of spud                      |                                       |
| date. <i>In all cases, N</i>                  |                     | •                     | ·                                     | Ιn                                       | $\sim \lambda_{\perp}/$                | 1                       |  |                                |                                       |
| hereby certify that the state                 | ements made he      | erein are tr          | ue and to the be                      | sy/o/ my-know                            | Gage Mad belief                        | / )                     |  |                                |                                       |
| Date: 10/5/00                                 | Signature of O      | perator or            | Agent:                                | ee K                                     | Nack                                   | Title:                  | Pres                                       | ident                          |                                       |
|   |                     |                       | •                                     | _  |  |                         |  |                                |                                       |
| For KCC Use ONLY                              | - •                 |                       |                                       | Reme                                     | mber to:                               |                         |  |                                | 1                                     |
| API # 15 - 135                                | -24115              | $-\infty$             | X)                                    | <u> </u>                                 | <b>Drill Pit Applicatio</b>            |                         |  | -                              |                                       |
| Conductor pipe required NONS teet             |                     |                       |                                       |  | Completion Form                        |                         |  |                                | 125                                   |
| , , , , ,                                     | 7                   | acreage attribution   | •                                     |  |  | ાળ                      |  |                                |                                       |
| Minimum surface pipe requi                    |                     |                       | et per Alt. 🗶 (                       | -J                                       | fy appropriate dist<br>entry;          | uici office 48 h        | ours prior to wo                           | TKOVEL OL                      | 1                                     |
| Approved by:                                  | 10-6-20             |                       |                                       |  | mit plugging repor                     | rt (CP-4) after r       | aluggina is com                            | oleted:                        |                                       |
| This authorization expires:                   | 4-6-                | <u> </u>              |                                       |  | ain written approva                    |                         |  |                                | .   _                                 |
| (This authorization void if drill)            | ing not started wit | thin 6 month          | s of effective date.                  |  |  |                         |  |                                | · ।6                                  |
| Spud date:                                    | Agent:              |                       |                                       | _  |  |                         |  |                                | N                                     |

### IN ALL CASES PLOT THE INTENDED WELL ON THE PLAT BELOW

Plat of acreage attributable to a well in a prorated or spaced field

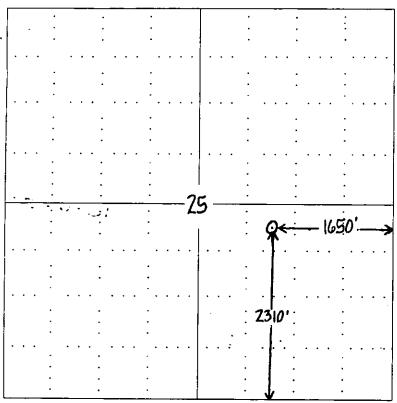
If the intended well is in a prorated or spaced field, please fully complete this side of the form. If the intended well is in a prorated or spaced field complete the plat below showing that the well will be properly located in relationship to other wells producing from the common source of supply. Please show all the wells and 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                            | Location of Well: County:  |  |  |  |  |  |
|---------------------------------------|--|--|--|--|--|--|
| Operator:                             | feet from S / N (circle one) Line of Section                       |  |  |  |  |  |
| Lease:                                | feet from E / W (circle one) Line of Section                       |  |  |  |  |  |
| Well Number:                          | Sec Twp S. R East Wesi   |  |  |  |  |  |
| · Field:                              |  |  |  |  |  |  |
| Number of Acres attributable to well: |  |  |  |  |  |  |
| QTR / QTR / QTR of acreage:           | If Section is Irregular, locate well from nearest corner boundary. |  |  |  |  |  |
|                                       | Section corner used: NE NW SE SW                                   |  |  |  |  |  |

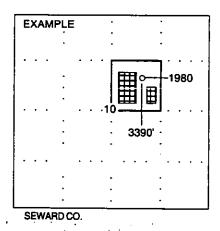
#### **PLAT**

(Show location of the well and shade attributable acreage for prorated or spaced wells.)

(Show footage to the nearest lease or unit boundary line.)







## 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.
- 3. The distance to the nearest lease or unit boundary line.
- 4. If proposed location is located within a prorated or spaced field a certificate of acreage attribution plat must be attached: (C0-7 for oil wells; \_\_CG-8 for gas wells).