EFFECTIVE DATE: 10 -24-90

State of Kansas

FORM MUST BE SIGNED

FORM MUST BE TYPED FORM C-1 4/90

NOTICE OF INTENTION TO DRILL

ALL BLANKS MUST BE FILLED

7.W

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

| Expected Spud Date | ber 20, 1990 | • | .C - SE NE. see | c .18. Tup .24. s, Rg 10 | _ East | |
|--|---|---|--|---------------------------------------|------------------|--|
| month | day | year | 3300 | foot for much it | | |
| | 30080 | _/ | ************* | feet from South (ine of | Section | |
| OPERATOR: LICENSE # | | | | feet from East line of | | |
| Name: HONEY OIL CO. | vales - Suid | -a 505 | (Note: Locate well | l on Section Plat on Reverse | \$1de) | |
| | | | Reno | | / | |
| City/State/Zip: .Wichit | д. Далуая Волл | 2.4.4.4 | County:Schaf | fin, Inc. well #: 1 | ······/ | |
| Contact Person: L. V. Bell Phone: 316/265-7700 | | | Lease Name: | ,T.T.T. Well #: , | | |
| Phone: | .77.99 | | Field Name: | · · · · · · · · · · · · · · · · · · · | ٧ | |
| CONTRACTOR: License #: | F030 | / | Is this a Prorated Fi | | ./ | |
| | | | | Viola | ٠٠٠٠٠٪٠٠٫ | |
| Name:QVKE.DRILLI | Νβ | *********** | Rearest lease or unit Ground Surface Elevat | t boundary: | foet HSu | |
| Well Drilled For: | Well Class: | Type Equipment: | Domestic well within | 330 feet: yesX. no | V. | |
| | | , | Hunicipal well within | n one mile: yesX. no | / / | |
| .X oit Inj | X Infield | .X. Mud Rotary | Depth to bottom of fr | resh water: | | |
| Gas Storage | Pool Ext. | Air Rotary | Depth to bottom of us | sable water:140' | , /. | |
| OWWO Disposal | Wildcat | Cable | Surface Pipe by Alter | nate: X 1 2 | / / | |
| Seismic; # of Holes | | | Length of Surface Pip | se Planned to be set: 270 . | | |
| - | | | Length of Conductor p | sipe required:None | | |
| If OLAO: old well informatio | | | , ojcotta iotot beptii | | | |
| Operator: | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | , | Formation at Total De | pth: | <i>V</i> | |
| Well Name: | | | Water Source for Dril | | | |
| Comp. Date: | | | j | well farm pond X. | . other | |
| 0 | | / | DWR Permit #: | | | |
| Directional, Deviated or Hor | izontal wellbore | 7 yes .¥ no | Will Cores Be Taken?: | yesX no | 1 | |
| If yes, total depth location | | | If yes, proposed zone | : | | |
| | | | | | | |
| • | - Ab-A ab- 1-811 | <u>AFFIDAVI</u> | _ | | ee +01 | |
| et. seq | s that the drill | ing, completion and ev | entual plugging of this | well will comply with K.S.A. | 33.101 | |
| It is agreed that the following | ing minimum requi | rements will be met: | | | | |
| The appropriate distr | | | etting surface pipe; | | | |
| 2. The minimum amount of surface pipe as specified above 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; 3. If the well is dry, a plugging proposal shall be submitted to the district office. An agreement between the operator | | | | | | |
| | | | cessary prior to pluggin | | oct ator | |
| | | | | production easing is comented | in; | |
| | | | | ble water to surface within 13 | 20 days | |
| I hereby certify that the sta | | listriet office prior | | and helded | | |
| 10/15/00 | | \ | | _ | | |
| Date: | nature of Operato | r or Agent: James B | Phillips | . Ittle | | |
| | FOR KCC USE: | | <u> </u> | NISERI Wise | | |
| | 1 # 15 1 | 55-21,146-0 | 200 | 雪里 3 . 1.6 | | |
| | | pe required None | | | \ ~ | |
| | Minimum surf | ace pipe required 10 | O feet per Alt. | उंटी ज | ≪ | |
| | Approved by: | MRW 10-19-90 | 2 | 9 5 - | 1 | |
| | EFFECTIVE DA | te: <u> </u> | . <u>.</u> . 1 | Sas W6 | | |
| > 7 | This authori | | 79-91 | | , O. Y | |
| | | ization void if drilli -effective date.} | ng not started within | | _ /- | |
| <i>\N</i> | | Agent | :: | 10-15-90 |) - | |
| - B- | ļ <u> </u> | | | , | • | |
| | | DEMENSED TO | n• | | | |

- 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.

PLAT OF ACREAGE ATTRIBUTABLE TO A WELL

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

| OPERATOR HONEY OIL CO., INC. LEASE Schaffin Inc. | LOCATION OF WELL: 3300 feet north of SE corner | | |
|--|--|--|--|
| WELL NUMBER 1 | 660 feet west of SE corner | | |
| FIELD Unknown | NE/4 Sec. 18 T 24S R 10 E/W | | |
| | COUNTY Reno | | |
| NO. OF ACRES ATTRIBUTABLE TO WELL 10 | IS SECTION X REGULAR IRREGULAR? | | |
| <u></u> | IF IRREGULAR, LOCATE WELL FROM NEAREST | | |
| DESCRIPTION OF ACREAGENE/4 | CORNER BOUNDARY. | | |
| NOTE: If plat depicted is insufficient your own scaled or surveyed plat. | for your circumstances, you may attach | | |
| PLA | NT | | |
| · · · · · · · · · · · · · · · · · · · | | | |
| | Jaco Al | | |
| | | | |
| | <u>. ; </u> | | |
| section with 8 surrounding partial sections, 4 3, the wells location relative to the location of . | oust by identifying section lines, i.e. : section, | | |
| the di tance of the proposed drilling location to | rom the section's east and south lines; and | | |
| the di tance to the nearest lease or unit pourpai | ry line. | | |
| hereby cert: y that the statements made here a use true | | | |
| signature of Ocerator or Agent | HOM . | | |
| ate 10/15/90 Title | 1 | | |