

CARD MUST BE TYPED

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

15-185-22-141-0000

CARD MUST BE SIGNED

Starting Date: ..... 12 ..... 13 ..... 84 .....  
month day year

API Number 15- 185-22,141

OPERATOR: License # 9963

SW 1/4 SW Sec 6 Twp 22 S, Rge 12  East  West  
(location)

Name CRUDE RECOVERY CORPORATION

Address 555 N. Woodlawn Bldg. 1 Ste. 207

City/State/Zip Wichita, KS 67208

Contact Person Vern Brungardt

Phone 681-3601

1400 Ft North from Southeast Corner of Section

3850 Ft West from Southeast Corner of Section

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

CONTRACTOR: License # 4049

Nearest lease or unit boundary line 1240 feet.

Name DYNASTY DRILLING CORP.

County Stafford

City/State Wichita, KS

Lease Name Krankenberg Well# 2

Well Drilled For: Well Class: Type Equipment:

- |   |   |   |  |
|---|---|---|--|
| <input checked="" type="checkbox"/> Oil | <input checked="" type="checkbox"/> Swd | <input checked="" type="checkbox"/> Infield | <input checked="" 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                 |

Domestic well within 330 feet:  yes  no

Municipal well within one mile:  yes  no

If OWWO: old well info as follows:

Operator .....

Well Name .....

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

Projected Total Depth ..... 3750 ..... feet

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

Expected Producing Formations ..... Arbuckle .....

Depth to Bottom of fresh water ..... 110 ..... feet

Lowest usable water formation ..... Top Permian .....

Depth to Bottom of usable water ..... 250 ..... feet

Surface pipe by Alternate: 1  2

Surface pipe to be set ..... 250 ..... feet

Conductor pipe if any required ..... none ..... feet

Ground surface elevation ..... feet MSL

This Authorization Expires 6-10-85

Approved By 12-10-84 *[Signature]*

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

Date 12-10-84 Signature of Operator or Agent

*Vern Brungardt*

Title Manager

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.

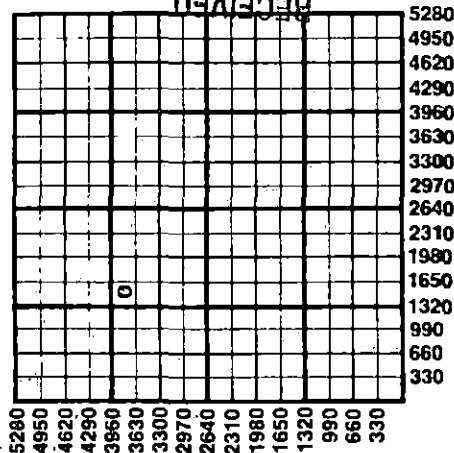
Wichita, Kansas  
CONSERVATION DIVISION

12-10-84

**Important procedures to follow:**

A Regular Section of Land  
1 Mile = 5,280 Ft.

STATE CORPORATION COMMISSION  
RECEIVED



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