

CARD MUST BE TYPED

State of Kansas

CARD MUST BE SIGNED

NOTICE OF INTENTION TO DRILL

(see rules on reverse side)

Starting Date 9-25-87 9-25-87
month day year

API Number 15- 153-20,693-00-00

OPERATOR: License # 5393
Name A. L. Abercrombie, Inc.
Address 801 Union Center
City/State/Zip Wichita, KS 67202
Contact Person Jack L. Partridge
Phone 316-262-1841

_____ East
C... NE. NW. Sec. 12... Twp... 1... S, Rg... 35... West
4620 Ft. from South Line of Section
3300 Ft. from East Line of Section

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

CONTRACTOR: License # 5422
Name Abercrombie Drilling, Inc.
City/State Wichita, KS 67202

Nearest lease or unit boundary line 560 feet

County Rawlins

Lease Name Sis Well # "A" #1

Ground surface elevation _____ feet MSL

Well Drilled For: Well Class: Type Equipment:
 Oil _____ SWD _____ Infield Mud Rotary
_____ Gas _____ Inj _____ Pool Ext. _____ Air Rotary
_____ OWWO _____ Expl Wildcat _____ Cable

Domestic well within 330 feet: _____ yes no

Municipal well within one mile: _____ yes no

Surface pipe by Alternate: 1 _____ 2 _____

If OWWO: old well info as follows:

Depth to bottom of fresh water 200

Depth to bottom of usable water 270 200

Surface pipe planned to be set 300'

Projected Total Depth 4300 feet

Formation LKC

Operator _____
Well Name N/A
Comp Date _____ Old Total Depth _____

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

_____ cementing will be done immediately upon setting production casing.
Date 9-15-87 Signature of Operator or Agent Jack L. Partridge Title Vice President

For KCC Use:

Conductor Pipe Required _____ feet; Minimum Surface Pipe Required 250 feet per Alt.

This Authorization Expires 3-16-88 Effective 9-21-87 Approved By PLH 9-16-87

