TO BE FILED WITH THE STATE CORPORATION COMMISSION
5 DAYS PRIOR TO COMMENCEMENT OF WELL

1. Operator ____________________________
   Murfin Drilling Company
   Address ____________________________
   617 Union Center Bldg.
   City-State ____________________________ Zip Code ________
   Wichita, KS 67202

2. Contractor ____________________________
   Murfin Drilling Company
   Address ____________________________
   617 Union Center Bldg.
   City-State ____________________________ Zip Code ________
   Wichita, KS 67202

3. Type of Equipment: Rotary: ______ Air: ______ Cable Tools: ______

4. Well to be Drilled for: Oil: ______ Gas: ______ SWD: ______ Input: ______

5. Well Classification: Infield ______ Pool Ext ______ Wildcat ______

6. Depth of Deepest Fresh Water within 1 mile ______ ft.

7. Depth of Municipal Water Well within 3 miles ______ ft.

8. Depth to Protect all Fresh Water (Table 1) ______ ft.

9. Amount of Surface Casing to be set ______ ft.

10. (Surface Casing) Alternate No. 1 ______ Alternate No. 2 ______

$40.00 FEE PAID ______

REMARKS: PC # 93142

API Number 15- ______

Starting Date 6 __________ 12 __________ 31 ______

County ______

Sec. ______ Twp. ______ S. Rng. ______

Exact Spot Location of Well C N/2 SW SW

Nearest Lease Line ______

Lease Name ______

Well No. ______

Estimated Total Depth ______ ft.

OPERATOR STATES THAT HE WILL COMPLY WITH K.S.A. 55-128

Signature of Operator ______

CN/OK
State Corporation Commission of Kansas
Conservation Division
245 North Water
Wichita, Kansas 67202