CARDS MUST BE TYPED

STATE OF KANSAS
NOTICE OF INTENTION TO DRILL

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

1. Operator ____________________________ Aegean Petroleums, Inc.
   Address ______________________________ P. O. Box 24
   City-State ______________________________ Osawatomie, Kansas Zip Code __________ 66064

2. Contractor ____________________________ C & M Drilling, Inc.
   Address ______________________________ Box 216
   City-State ______________________________ Mound City, Ks Zip Code __________ 66056

3. Type of Equipment: Rotary: X Air: ______ Cable Tools: ______
4. Well to be Drilled for: Oil: X Gas: ______ SWD: ______ Input: ______
5. Well Classification: Infield ______ Pool Ext. X Wildcat ______
6. Depth of Deepest Fresh Water within 1 mile ______ ft. none
7. Depth of Municipal Water Well within 3 miles ______ ft. none
8. Depth to Protect all Fresh Water (Table 1) ______ ft. 200
9. Amount of Surface Casing to be set ______ ft. 21
10. (Surface Casing) Alternate No. 1 ______ Alternate No. 2 X

$40.00 FEE PAID _______ REMARKS: X 5-29-81

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

API Number 15-128-22,943 (For office use only)
Starting Date ______ 6 2 81 Month ______ Day ______ Year ______
County __________ Miami __________
Sec. ______ Twp. ______ S. Rng. ______ East ______
SW 1/4 ________ West ______
Exact Spot Location of Well _______ 1240' SNL, 740' WEL
Nearest Lease Line ___________ 740' WEL
Lease Name ________ Hollinger __________
Well No. ________ A-9 __________
Est. Total Depth ________ ft. 750'

Signature of Operator ____________