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

1. Operator: Mid-States Energy Corporation
   Address: P. O. Box 402
   City-State: Paola, Kansas Zip Code: 66071

2. Contractor: Mid-States Energy Corporation
   Address: P. O. Box 402
   City-State: Paola, Kansas Zip Code: 66071

3. Type of Equipment: Rotary: X Air: ___ Cable Tools: ___
4. Well to be Drilled for: Oil: X Gas: ___ SWD: ___ Input: ___
6. Depth of Deepest Fresh Water within 1 mile: 20 ft.
7. Depth of Municipal Water Well within 3 miles: None ft.
8. Depth to Protect all Fresh Water (Table 1): 200 ft.
9. Amount of Surface Casing to be set: 45 ft.
10. (Surface Casing) Alternate No. 1: ___ Alternate No. 2: X

API Number 15-121-22,836 (For office use only)

Starting Date: 4/28/81

County: Miami

Sec. 31 Twp. 16 S. Rng. 24 East

Exact Spot Location of Well: NW SW SE
990' from South line
330' from West line

Nearest Lease Line: ___

Lease Name: Kirby-Nelson

Well No.: #7

Est. Total Depth: 700 ft.

$40.00 FEE PAID

REMARKS: CC #124899

Signature of Operator: [Signature]

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