KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
NOTICE OF INTENT TO DRILL

Must be approved by KCC five (5) days prior to commencing well
All blanks must be Filled

For KCC Use:

Effective Date:

April 15, 1980

District 

SGA? Yes No

KSC 3079

CorrectTel

July 16, 2005

Expected Spud Date:

June 1

OPERATOR:

Name:

Derk Cherokee Basin Operating Co., LLC

Address:

3512-55 County Rd.

Contact Person:

Tony Williams

Phone:

620-331-2733

CONTRACTOR:

Name:

AKS Drilling License # 1488

Address:

6740 St. Rd.

Contact Person:

Tony Williams

Phone:

620-331-2733

Oil Field:

Name:

AOC 3-1-1 licensed drilling contractor

Well Class:

Well No:

Well Depth:

IF W:\M:

old well information as follows:

Operator:

Well Name:

Original Completion Date:

Original Total Depth:

Directional, Deviated or Horizontal well?

Yes No

Well Location:

JUL 17 2005

CONSERVATION DIVISION

The undersigned hereby affirms that all necessary permission, completion and eventual plugging of this well will comply with K.S.A. 55 et seq.

I hereby certify that the statements made herein are true and to the best of my knowledge and belief.

Date:

July 9, 2005

Signature of Operator or Agent:

Title:

Oil, Gas & Conservation Specialist

Mail to:

KCC Conservation Division
130 S. Market
Room 2079
Wichita, Kansas 67202

For KCC Use Only:

API # 15, 125-30797-3079-00

Conductor pipe required:

10-20

Minimum surface pipe required:

10-20

Approved Spud Date:

11-20-05

This notification expires:

1-11-06

Remember to:

File Drilling Form AOC-1 with KCC

File Completion Form AOC-1 with 120 days of spud date

File acreage identification map according to Kansas provisions

Notify appropriate district office 48 hours prior to drilling or completion

Submit plugging report (CP-4) after plugging is completed

Obtain written approval before disposing or injecting of water

If the permit has expired (See: authorized expiration D.W. label) check the box below and return to the address below:

Well Not Drilled - Permit Expired

Signature of Operator or Agent:

Date:

December 2000

Form must be Typed

Form must be Signed