

Permit #: 20193

Date Issued: 2-14-96

County: Bates

Date Cancelled: 7-10-96

CONFIDENTIAL UNTIL: \_\_\_\_\_

Date Plugged: 7/5

COMMENTS:

OGC FORMS	Date Received
1	
2	
3	
3i	<u>2-12-96</u>
4	
4i	
5	
6	
7	
8	
11	
12	
Misc. Form 2	

	TYPE	ID #	Date Received
Logs			
Samples	chip		
	core		
Analyses	water		
	core		

Additional Submitted Data:

*cancel*

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

APPLICATION TO DRILL  DEEPEN  PLUG BACK

for an oil well  or gas well  Hydrocarbon Test X

NAME OF COMPANY OR OPERATOR Town Oil Co. DATE 2-12-96  
16205 W. 287 St. Paola Kansas 66071  
Address City State

DESCRIPTION OF WELL AND LEASE

Name of lease Tourtillot Well number 2 Elevation (ground) 860

WELL LOCATION (give footage from section lines)  
2300 ft. from (N) (S) sec. line 200 ft. from (E) (W) sec. line

WELL LOCATION Section 24 Township 38N Range 33W County Bates

Nearest distance from proposed location to property or lease line: N/A feet  
Distance from proposed location to nearest drilling, completed or applied for well on the same lease: N/A feet

Proposed depth: 75 Drilling contractor, name & address: Town Oil Co. Rotary or Cable Tools: Rotary Approx. date work will start: 2-12-96

Number of acres in lease: 120  
Number of wells on lease, including this well, completed in or drilling to this reservoir: 0  
Number of abandoned wells on lease: 0

If lease, purchased with one or more wells drilled, from whom purchased: Name N/A Address \_\_\_\_\_  
No. of Wells: producing 0, injection 0, inactive 0, abandoned 0

Status of Bond  
Single Well  Amt. \_\_\_\_\_ Blanket Bond  Amt. \$60,000  ON FILE  ATTACHED

Remarks: (If this is an application to deepen or plug back, briefly describe work to be done, giving present producing zone and expected new producing zone) use back of form if needed.  
N/A

RECEIVED  
APR 05 1996

Proposed casing program: N/A Approved casing -- To be filled in by State Geologist N/A

amt.	size	wt./ft.	cem.	amt.	size	wt./ft.	cem.

I, the undersigned, state that I am the \_\_\_\_\_ of the \_\_\_\_\_ (company), and that I am authorized by said company to make this report, and that this report was prepared under my supervision and direction and that the facts stated therein are true, correct and complete to the best of my knowledge.  
Signature Lulu Town

Permit Number: 20193  
Approval Date: \_\_\_\_\_  
Approved By: \_\_\_\_\_  
 Drillers log required  Drill stem test info. required if run  
 E-logs required if run  Samples required  
 Core analysis required if run  Samples not required

Note: This Permit not transferable to any other person or to any other location.  
Remit two copies to: Missouri Oil and Gas Council P.O. Box 250 Rolla, Mo. 65401  
One will be returned for driller's signature  
WATER SAMPLES REQUIRED

Approval of this permit by the Oil and Gas Council does not constitute endorsement of the geologic merits of the proposed well nor endorsement of the qualifications of the permittee.