

Permit #: 20195

Date Issued: 2-14-96

County: Bates

Date Cancelled: 5-13-96

CONFIDENTIAL UNTIL: _____

Date Plugged: _____

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:

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 Eastland Well number 8/8 Elevation (ground) 913

WELL LOCATION (give footage from section lines)
2400 ft. from (N) (S) sec. line 2200 ft. from (E) (W) sec. line

WELL LOCATION Section 20 Township 38N Range 32W 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.

RECEIVED N/A

Proposed casing program: <u>N/A</u>				Approved casing -- To be filled in by State Geologist <u>N/A</u>			
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: 20195
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.

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inactive 0
abandoned 0
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N/A

RECEIVED
FEB 20 1996

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_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____

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Approval Date: 2/14/96 E-logs required if run Samples required
Approved By: James H. ... Core analysis required if run Samples not required

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