

Missouri Oil and Gas Council

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

APPLICATION TO DRILL DEEPEN PLUG BACK
 for an oil well or gas well

Oil & Gas Council

NAME OF COMPANY OR OPERATOR Town Oil Co. DATE 5-2-97
16205 W. 287 St. Paola Kansas 66071

Address			City			State		
DESCRIPTION OF WELL AND LEASE								
Name of lease <u>Garrison</u>			Well number <u>1</u>			Elevation (ground) est. <u>850'</u>		
WELL LOCATION <u>180 FSL</u> (give footage from section lines) <u>175</u> ft. from (N)(S) sec. line <u>4790</u> ft. from (E)(W) sec. line <u>490 FWL</u>								
WELL LOCATION Section <u>9</u> Township <u>41N</u> Range <u>31W</u>						County <u>Bates</u>		
Nearest distance from proposed location to property or lease line: <u>175</u> feet				Distance from proposed location to nearest drilling, completed or applied for well on the same lease: <u>unk</u> feet				
Proposed depth <u>400</u>	Drilling contractor, name & address <u>Town Oil</u>			Rotary or Cable Tools		Approx. date work will start <u>5-5-97</u>		
Number of acres in lease <u>240</u>				Number of wells on lease, including this well, completed in or drilling to this reservoir: <u>1</u>				
				Number of abandoned wells on lease: <u>0</u>				
If lease, purchased with one or more wells drilled, from whom purchased: Name _____ Address _____						No. of Wells: producing _____ injection _____ inactive _____ abandoned _____		
Status of Bond Single Well <input type="checkbox"/> Amt. _____ Blanket Bond <input checked="" type="checkbox"/> Amt. <u>20,000</u>								
<input checked="" type="checkbox"/> ON FILE <input type="checkbox"/> 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.								
Proposed casing program				Approved casing -- To be filled in by State Geologist				
amt. <u>20'</u>	size <u>6 1/4</u>	wt /ft	cem. <u>3 sacks</u>	amt. <u>"</u>	size <u>"</u>	wt /ft	cem. <u>"</u>	
<u>400'</u>	<u>2 7/8</u>		<u>to surface</u>				<u>"</u>	
I, the undersigned, state that I am the <u>partner</u> of the <u>Town Oil Co.</u> (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 <u>Lester Town</u>								

Permit Number: 20266 Drillers log required Drill stem test info. required if run
 Approval Date: 5/5/97 5114/98 E-logs required if run Samples required
 Approved By: James Holly Williams Core analysis required if run Samples not required
 Note: This Permit not transferable to any other person or to any other location. 5AS

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 @



MISSOURI DEPARTMENT OF NATURAL RESOURCES
MISSOURI OIL AND GAS COUNCIL
APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

APPLICATION TO DRILL DEEPEN PLUG BACK FOR AN OIL WELL OR GAS WELL

NAME OF COMPANY (OR OPERATOR) PENSE BROS. DRIG. Co., INC. DATE _____
ADDRESS 800 NEWBERRY ST. CITY FREDERICKTOWN STATE MO ZIP CODE 63645
P.O. Box 551

DESCRIPTION OF WELL AND LEASE

NAME OF LEASE GARRISON WELL NUMBER #1 ELEVATION (GROUND) 869'

WELL LOCATION (GIVE FOOTAGE FROM SECTION LINE) 180 FT. FROM (N/S) SECTION LINE 490 FEET FROM (E/W) SECTION LINE

ACREAGE SECTION SW/4 SW/4 9 TOWNSHIP 41N RANGE 31W COUNTY BATES

NEAREST DISTANCE FROM PROPOSED LOCATION TO PROPERTY OR LEASE LINE 180 FEET
DISTANCE FROM PROPOSED LOCATION TO NEAREST DRILLING, COMPLETED OR APPLIED - FOR WELL ON THE SAME LEASE N/A FEET

DEPTH OF WELL 300' DRILLING CONTRACTOR NAME AND ADDRESS TOWN OIL COMPANY - OPERATOR ROTARY OR CABLE TOOLS ROTARY APPROX DATE WORK WILL START ON PERMIT
16205 W. 28TH ST. PADONAS66071

NUMBER OF WELLS ON LEASE, INCLUDING THIS WELL, COMPLETED OR DRILLING TO THIS RESERVOIR 1
NUMBER OF ABANDONED WELLS ON LEASE 0

IF LEASE PURCHASED WITH ONE OR MORE WELLS DRILLED, FROM WHOM PURCHASED?
NAME N/A NO OF WELLS PRODUCING
ADDRESS _____ INJECTION
INACTIVE
ABANDONED

STATUS OF BOND SINGLE WELL AMOUNT \$ _____ BLANKET BOND AMOUNT \$2000000 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

PROPOSED CASING PROGRAM				APPROVED CASING -- TO BE FILLED IN BY STATE GEOLOGIST			
AMOUNT	SIZE	WT/FT	CEM.	AMOUNT	SIZE	WT/FT	CEM
<u>50'</u>	<u>6 1/4</u>	<u>14#</u>	<u>TO SURF.</u>				
<u>T.P. TO SURF</u>	<u>2 1/8</u>	<u>65#</u>	<u>TO SURF</u>				

I, the undersigned, state that I am the PARTNER of the TOWN OIL COMPANY (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 Lester Town DATE 4-3-98
PERMIT NUMBER 20266

APPROVAL DATE 5/14/98
APPROVED BY _____
 DRILLER'S LOG REQUIRED E-LOGS REQUIRED IF RUN
 CORE ANALYSIS REQUIRED IF RUN DRILL STEM TEST INFO REQUIRED IF RUN
 SAMPLES REQUIRED
 SAMPLES NOT REQUIRED
 WATER SAMPLES REQUIRED AT _____

NOTE ► THIS PERMIT NOT TRANSFERABLE TO ANY OTHER PERSON OR TO ANY OTHER LOCATION

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

_____ of the _____ Company confirms that an approved drilling permit has been obtained by the owner of this well. Council approval of this permit will be shown in this form by presence of a permit number and signature of authorized council representative.

DATE _____



MISSOURI DEPARTMENT OF NATURAL RESOURCES
MISSOURI OIL AND GAS COUNCIL
PLUGGING RECORD

RECEIVED DEC 17 1998

FORM OGC-7

OWNER Town Oil Co.		ADDRESS 16205 W. 287 St. Paola, KS. 66071		
NAME OF LEASE Garrison		WELL NUMBER 1	PERMIT NUMBER (OGC-3 OR OGC-31 NUMBER) 20266	
LOCATION OF WELL 180' FSL 490' FWL		SEC-TWP-RNG OR BLOCK & SURVEY 9-41N-31W	COUNTY Bates	
APPLICATION TO DRILL THIS WELL WAS FILED IN NAME OF Town Oil	HAS THIS WELL EVER PRODUCED OIL OR GAS? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	CHARACTER OF WELL AT COMPLETION (INITIAL PRODUCTION) OIL (BBL/DAY) _____ GAS (MCF/DAY) _____		DRY? Yes
DATE ABANDONED 7-7-97	TOTAL DEPTH 480'	AMOUNT WELL PRODUCING PRIOR TO ABANDONMENT OIL (BBL/DAY) _____ GAS (MCF/DAY) _____	WATER (BBL/DAY) _____	

Name of each formation containing oil or gas. Indicate which formation open to well bore at time of abandonment.	Fluid content of each formation	Depth interval of each formation	Size, kind, & depth of plugs used, giving amount cement.
			Mix & pump cement circulating to surface; pull 2 7/8" out of hole; top hole off to surface with 70 sx cement.

SIZE PIPE	PUT IN WELL (FT)	PULLED OUT (FT)	LEFT IN WELL (FT)	GIVE DEPTH AND METHOD OF PARTING CASING (SHOT, RIPPED, ETC.)	PACKERS AND SHOES
6 1/4	21'	Cut off below plow depth			
2 7/8	425'	Pulled out			

WAS WELL FILLED WITH MUD-LADEN FLUID? _____ INDICATE DEEPEST FORMATION CONTAINING FRESH WATER _____

NAME AND ADDRESSES OF ADJACENT LEASE OPERATORS OR OWNERS OF THE SURFACE

NAME	ADDRESS	DIRECTION FROM THIS WELL

METHOD OF DISPOSAL OF MUD PIT CONTENTS ▶ Covered with dirt

NOTE ▶ FILE THIS FORM IN DUPLICATE WITH (USE REVERSE SIDE FOR ADDITIONAL DETAIL)

CERTIFICATE ▶ I, the undersigned, state that I am the partner of the Town Oil Co. (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 Lutz Town DATE 12-15-98

Well #1
Farm: Garrison
Bates County, MO.
Lease Owner: Pense Bros Drilling Co.

WELL LOG

<u>Thickness of Strata</u>	<u>Formation</u>	<u>Total Depth</u>
0	Soil & clay	12
28	Shale	40
5	Sand	45
26	Shale	71
21	Sand laminated	92
3	Shale	95
108	Sand	203
57	Sand	260
1	Lime	261
12	Sand	273
11	Lime	284
37	Shale	321
2	Black shale	323
99	Shale	422
12	Sandy shale	434
2	Black shale	436
9	Sandy shale	445
35	Shale	480 TD

CONSOLIDATED INDUSTRIAL SERVICES, INC.
 211 W. 14TH STREET, CHANUTE, KS 66720
 316-431-9210 or 800-467-8676

TICKET NUMBER 2609

LOCATION Ottawa, Ks.

FOREMAN Jim Green

TREATMENT REPORT

3 of 4 wells

DATE <u>7-7-99</u>	CUSTOMER ACCT # <u>7823</u>	WELL NAME <u>Garrison</u>	QTR/QTR	SECTION <u>9</u>	TWP <u>41</u>	RGE <u>31</u>	COUNTY <u>Bates, Mo.</u>	FORMATION
CHARGE TO <u>Town Oil Co.</u>				OWNER				
MAILING ADDRESS <u>16205 W. 287 ST</u>				OPERATOR <u>Lester Town</u>				
CITY <u>Paola,</u>				CONTRACTOR <u>Town Oil Co.</u>				
STATE <u>Ks.</u>		ZIP CODE <u>66071</u>		DISTANCE TO LOCATION				
TIME ARRIVED ON LOCATION				TIME LEFT LOCATION				

WELL DATA

HOLE SIZE	<u>5 7/8"</u>
TOTAL DEPTH	<u>425'</u>
CASING SIZE	<u>2 3/8"</u>
CASING DEPTH	<u>425'</u>
CASING WEIGHT	
CASING CONDITION	
TUBING SIZE	
TUBING DEPTH	
TUBING WEIGHT	
TUBING CONDITION	
PACKER DEPTH	
PERFORATIONS	
SHOTS/FT	
OPEN HOLE	
TREATMENT VIA	

TYPE OF TREATMENT

<input type="checkbox"/> SURFACE PIPE	<input type="checkbox"/> ACID BREAKDOWN
<input type="checkbox"/> PRODUCTION CASING	<input type="checkbox"/> ACID STIMULATION
<input type="checkbox"/> SQUEEZE CEMENT	<input type="checkbox"/> ACID SPOTTING
<input checked="" type="checkbox"/> PLUG & ABANDON	<input type="checkbox"/> FRAC
<input type="checkbox"/> PLUG BACK	<input type="checkbox"/> FRAC + NITROGEN
<input type="checkbox"/> MISC PUMP	<input type="checkbox"/> FOAM FRAC
<input type="checkbox"/> OTHER	<input type="checkbox"/> NITROGEN

PRESSURE LIMITATIONS

	THEORITICAL	INSTRUCTED
SURFACE PIPE		
ANNULUS LONG STRING		
TUBING		

INSTRUCTIONS PRIOR TO JOB

JOB SUMMARY

DESCRIPTION OF JOB EVENTS Mix and pump cement circulating to surface. Pull 2 3/8" out of hole top hole off to surface with cement. Used 70sk total

PRESSURE SUMMARY

BREAKDOWN or CIRCULATING	psi
FINAL DISPLACEMENT	psi
ANNULUS	psi
MAXIMUM	psi
MINIMUM	psi
AVERAGE	psi
ISIP	psi
5 MIN SIP	psi
15 MIN SIP	psi

TREATMENT RATE

BREAKDOWN BPM
INITIAL BPM
FINAL BPM
MINIMUM BPM
MAXIMUM BPM
AVERAGE BPM
HYD HHP = RATE x PRESSURE x 40.8

AUTHORIZATION TO PROCEED _____ TITLE _____ DATE _____

TOWN OIL COMPANY
16205 West 287th St.
Paola, Kansas 66071

FAX (913) 294-4823

Telephone (913) 294-2125 or (913) 557-5482

FROM: Lester Town
TO: Evan Kiper
FAX NO. 573 368-2111

Number of Pages: 4 (including cover)
Date: 4-3-98
Time: 4:00 P.M.

This well was previously permitted as 20266 515197.
Well is to be drilled. Survey attached to this document. Distances
for well location have been adjusted on original permit to reflect
surveyors measurements. Surface casing to be used is as indicated on
original permit.

Evan Kiper
4/15/98

WELL LOCATION MAP _ BATES COUNTY TAX MAP 65-08-2

NORTH



1"=400'±

SHEET 2 OF 2

WILLIAM C. LETHCHO
LS-1539

Wm
57237

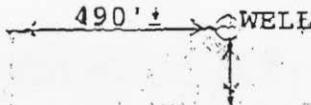
RAILROAD

J. HAROLD POLSTON, TRUST

ROGER & PAMELA HIGHLEY

EMSLEY GARRISON

JACK & EVELYN SCOTT



TAIN RGRW BATES CO. MD
JACK TALLEY

W. C. LETHCHO
 COUNTY ENGINEER & SURVEYOR
 Bates County Court House
 BUTLER, MO 64730
 Phone 679-4031

WELL REFERENCE TIES IN THE SOUTH HALF OF THE SOUTHWEST QUARTER
 OF SECTION 9, TOWNSHIP 41 NORTH, RANGE 31 WEST OF THE 5TH
 PRINCIPAL MERIDIAN IN BATES COUNTY, MISSOURI



FOUND SPIKE
 WEST 1/4 COR 9-41-31

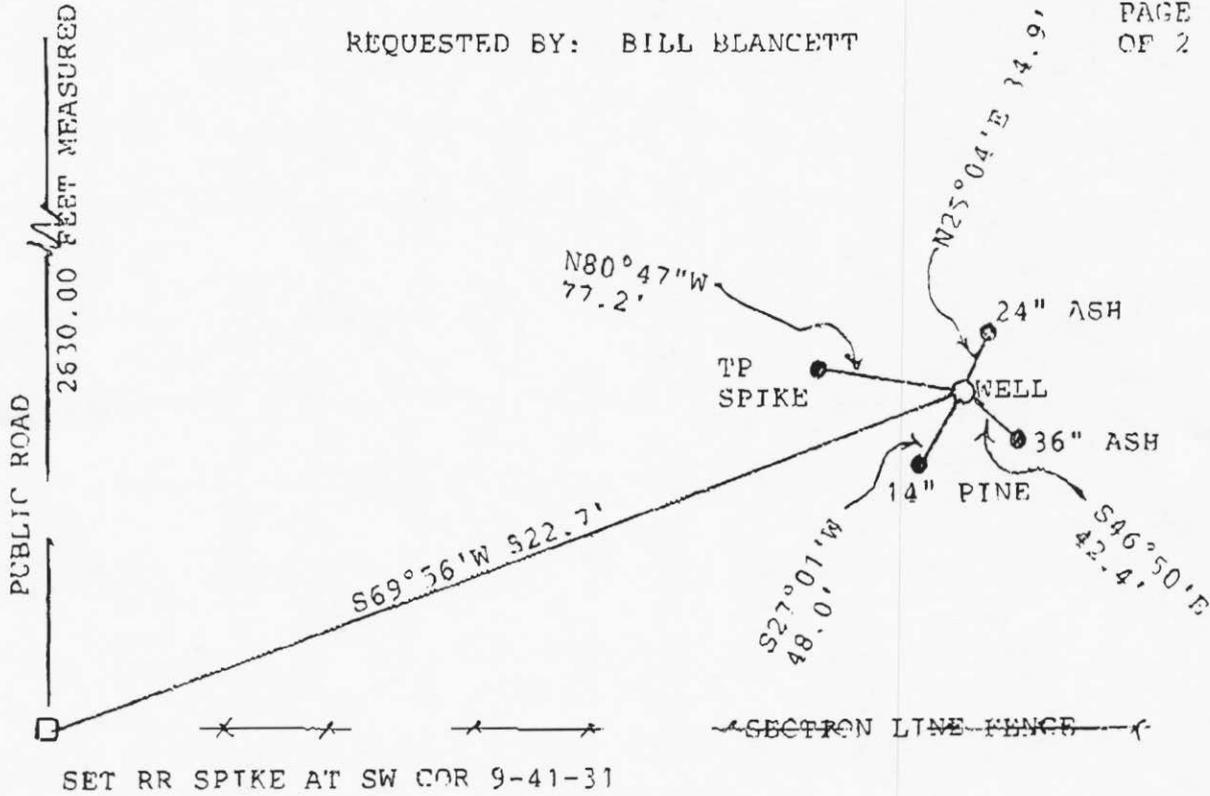
1" = 100'

FOR: TOWN OIL CO.
 16205 WEST 287TH ST.
 PAOLA, KS 66071
 913.557-5482

WEST LINE OF
 9-41-31
 ASSUMED
 NORTH-SOUTH

REQUESTED BY: BILL BLANCETT

PAGE 1
 OF 2



THESE TIES ARE IN ACCORDANCE
 WITH CURRENT MINIMUM STANDARDS

WILLIAM C. LETHCHO LS-1539

William C. Lethcho



Date of Fax: 4-15-98

- Priority
- Routine
- As Requested
- FYI

To: Lester Town

From: Evan Kifer

FAX: (913) 294-4823 Phone: _____

FAX: _____ Phone: (573) 368-2170

SUBJECT: Garrison #1 Permit

COMMENTS: As Requested

RESPONSE EXPECTED: None

Total # of pages sent (including transmittal sheet): 2

If problems with FAX call: (573) 368-2170

Well Certif #

July -
87 -

Tommy Fisher - Remar

417-844-1176

Londaker -

well Certif # - for

Jim Vench -

See

→ 314-849-2880.

Orl. - Secc drilling

H06401-000

other # 456149.