

APPLICATION FOR PERMIT TO DRILL, DEEPEN OR PLUG BACK

APPLICATION TO DRILL DEEPEN PLUG BACK

NAME OF COMPANY OR OPERATOR GENERAL ENERGY, INC. DATE 5-25-82
Box 216 Mound City, Kansas 66056
Address City State

DESCRIPTION OF WELL AND LEASE

Name of lease KNOCHE Well number #3 Elevation (ground) 995

WELL LOCATION (give footage from section lines)
671 ft. from ~~XX~~ (S) sec. line 2487 ft. from ~~X~~ (W) sec. line

WELL LOCATION Section 4 Township 46 Range 33 County CASS

Nearest distance from proposed location to property or lease line: 165 feet
Distance from proposed location to nearest drilling, completed or applied - for well on the same lease: ~~28~~253 feet

Proposed depth: 600 Rotary or Cable tools rotary Approx. date work will start 5-30-82

Number of acres in lease 40 Number of wells on lease, including this well, 4 completed in or drilling to this reservoir: _____
Number of abandoned wells on lease: 0

If lease, purchased with one or more wells drilled, from whom purchased: Name _____ No. of Wells: producing _____
Address _____ inactive _____
abandoned _____

Status of Bond Single Well Amt. _____ Blanket Bond Amt. 20,000 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.

Proposed casing program				Approved casing - To be filled in by State Geologist			
amt.	size	wt./ft.	cem.	amt.	size	wt./ft.	cem.
<u>20</u>	<u>7"</u>		<u>yes</u>				
<u>600</u>	<u>2"</u>		<u>yes</u>				

I, the undersigned, state that I am the president of the General Energy, Inc. (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 Gilbert M. Lawton

Permit Number #20358
Approval Date 6/1/82
Approved By Wallace B. Howe

RECEIVED

Note: This Permit not transferable to any other person or to any other location

MAY 28 1982

SAMPLES REQUIRED
 SAMPLES NOT REQUIRED
WATER SAMPLES REQUIRED @: _____

Remit two copies to: Missouri Oil and Gas Council
P.O. Box 250 Rolla, Mo. 65401 MO. OIL & GAS COUNCIL
One will be returned for driller's signature

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.



INJECTION WELL PERMIT APPLICATION
(TO DRILL, DEEPEN, PLUG BACK, OR CONVERT AN EXISTING WELL)

NOTE

Permit approval for **drilling only, not injection**. Approval or denial for injection determined after Mechanical Integrity Test results reviewed and official notification given.

APPLICATION TO DRILL DEEPEN PLUG BACK CONVERSION

NAME OF COMPANY OR OPERATOR Colt Energy, Inc.		DATE 4-17-92	
ADDRESS P.O. Box 388	CITY Iola	STATE KS	ZIP CODE 66749

DESCRIPTION OF WELL AND LEASE

NAME OF LEASE Knoche	WELL NUMBER 3	ELEVATION (GROUND) 995
WELL LOCATION (GIVE FOOTAGE FROM SECTION LINES) 671 FT. FROM (X) (S) SEC. LINE 2487 FT. FROM (E) (W) SEC. LINE		
SECTION 4	TOWNSHIP 46	RANGE 33
COUNTY Cass		

NEAREST DISTANCE FROM PROPOSED LOCATION TO PROPERTY OR LEASE LINE 165 FEET
DISTANCE FROM PROPOSED LOCATION TO NEAREST DRILLING, COMPLETED OR APPLIED — FOR WELL ON THE SAME LEASE 330 FEET

PROPOSED DEPTH 570	ROTARY OR CABLE TOOLS	DRILLING CONTRACTOR, NAME AND ADDRESS	APPROX. DATE WORK WILL START
NUMBER OF ACRES IN LEASE	NUMBER OF WELLS ON LEASE, INCLUDING THIS WELL, COMPLETED IN OR DRILLING TO THIS RESERVOIR <u>7</u>		NUMBER OF ABANDONED WELLS ON LEASE <u>2</u>

IF LEASE PURCHASED WITH ONE OR MORE WELLS DRILLED, FROM WHOM PURCHASED? NAME <u>General Energy, Inc.</u> ADDRESS <u>Mound City, Kansas 66056</u>	NO. OF WELLS: PRODUCING <u>3</u> INJECTION <u>2</u> INACTIVE _____ ABANDONED <u>2</u>
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STATUS OF BOND	<input type="checkbox"/> SINGLE WELL AMOUNT \$ _____	<input checked="" type="checkbox"/> BLANKET BOND AMOUNT \$ _____	<input checked="" type="checkbox"/> ON FILE <input type="checkbox"/> ATTACHED
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REMARKS: (IF THIS IS AN APPLICATION TO DEEPEN OR PLUG BACK, BRIEFLY DESCRIBE WORK TO BE DONE, GIVING PRESENT PRODUCING/INJECTION ZONE AND EXPECTED NEW INJECTION ZONE; USE BACK OF FORM IF NEEDED.)

Well to be converted to injection
Injection zone to be 504-522

PROPOSED CASING PROGRAM				APPROVED CASING — TO BE FILLED IN BY STATE GEOLOGIST			
AMOUNT	SIZE	WT/FT	AMT. OF CEM.	AMOUNT	SIZE	WT/FT	AMT. OF CEM.
20'	7"		To Surface	20'	7"		To Surface
567'	2"		To Surface	567'	2"		To Surface

I, the undersigned, state that I am the Agers of the Colt Energy, Inc. (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 Donnie Keenan DATE 4-20-92

PERMIT NUMBER 20356	<input checked="" type="checkbox"/> DRILLER'S LOG REQUIRED	<input checked="" type="checkbox"/> E-LOGS REQUIRED IF RUN
APPROVED DATE 5/11/92	<input checked="" type="checkbox"/> CORE ANALYSIS REQUIRED IF RUN	<input checked="" type="checkbox"/> DRILL STEM TEST INFO. REQUIRED IF RUN
APPROVED BY <u>James H. Williams</u>	<input type="checkbox"/> SAMPLES REQUIRED	RECEIVED APR 23 1992
	<input checked="" type="checkbox"/> SAMPLES NOT REQUIRED	
	<input type="checkbox"/> 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.

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

DRILLER'S SIGNATURE

DATE

PROPOSED OPERATIONS DATA

PROPOSED AVERAGE DAILY INJECTION,	PRESSURE <u>100</u> PSIG, RATE <u>10</u> BPD/GPM, VOLUME _____ BBL/GAL
APPROVED AVERAGE DAILY INJECTION, (TO BE FILLED IN BY STATE GEOLOGIST).	PRESSURE <u>100</u> PSIG, RATE <u>10</u> BPD/GPM, VOLUME _____ BBL/GAL
PROPOSED MAXIMUM DAILY INJECTION,	PRESSURE <u>500</u> PSIG, RATE <u>50</u> BPD/GPM, VOLUME _____ BBL/GAL
APPROVED MAXIMUM DAILY INJECTION, (TO BE FILLED IN BY STATE GEOLOGIST).	PRESSURE <u>500</u> PSIG, RATE <u>50</u> BPD/GPM, VOLUME _____ BBL/GAL

ESTIMATED FRACTURE PRESSURE/GRADIENT OF INJECTION ZONE _____ PSI/FOOT

DESCRIBE THE SOURCE OF THE INJECTION FLUID

NOTE ▶ SUBMIT AN APPROPRIATE ANALYSIS OF THE INJECTION FLUID. (SUBMIT ON SEPARATE SHEET)

DESCRIBE THE COMPATIBILITY OF THE PROPOSED INJECTED FLUID WITH THAT OF THE RECEIVING FORMATIONS, INCLUDING TOTAL DISSOLVED SOLIDS COMPARISONS.

Same ReInjection

GIVE AN ACCURATE DESCRIPTION OF THE INJECTION ZONE INCLUDING LITHOLOGIC DESCRIPTIONS, GEOLOGIC NAME, THICKNESS, DEPTH, POROSITY, AND PERMEABILITY.

0-20'

24 Porosity

200 Millidarcys

GIVE AN ACCURATE DESCRIPTION OF THE CONFINING ZONES INCLUDING LITHOLOGIC DESCRIPTION, GEOLOGIC NAME, THICKNESS, DEPTH, POROSITY, AND PERMEABILITY.

Same above & below

SUBMIT ALL AVAILABLE LOGGING AND TESTING DATA ON THE WELL

GIVE A DETAILED DESCRIPTION OF ANY WELL NEEDING CORRECTIVE ACTION WHICH PENETRATES THE INJECTION ZONE IN THE AREA OF REVIEW (1/2 MILE RADIUS AROUND WELL). INCLUDE THE REASON FOR AND PROPOSED CORRECTIVE ACTION.

None Known

WELL COMPLETION OR RECOMPLETION REPORT AND WELL LOG

New Well Work-Over Deepen Plug Back Same Reservoir Different Reservoir Oil Gas Dry

Owner: General Energy, Inc. Address: Box 216 Mound City, Kansas 66056

Lease Name: Knoche Well Number: #3

Location: 671' from S sec. line 2487' from W sec. line Sec. - TWP-Range or Block & Survey 4 - 46 - 33

County: Cass Permit number (OGCJ number): # 20356

Date spudded: 6/7/82 Date total depth reached: 6/9/82 Date completed, ready to produce: Elevation (DF, RKR, RT or Gr.) feet: Elevation of casing hd. flange 995 feet

Total depth: 570' P. B. T. D.

Producing interval (s) for this completion: Rotary tools used (interval) From 0 to 570' Cable tools used (interval) From to

Was this well directionally drilled? NO Was directional survey made? Was copy of directional survey filed? Date filed

Type of electrical or other logs run (list logs filed with the State Geologist): Gamma Ray/ Neutron Date filed

CASING RECORD

Casing (report all strings set in well—conductor, surface, intermediate, producing, etc.)						
Purpose	Size hole drilled	Size casing set	Weight (lb ft.)	Depth set	Sacks cement	Amt pulled
Surface	8 3/4	7"		20'		
Pumping	6 1/8	2"		567'		

TUBING RECORD

LINER RECORD

Size	Depth set	Packer set at	Size	Top	Bottom	Sacks cement	Screen (ft.)
2 in.	567 ft.	ft.	in.	ft.	ft.		

PERFORATION RECORD

ACID, SHOT, FRACTURE, CEMENT SQUEEZE RECORD

Number per ft.	Size & type	Depth Interval	Amt. & kind of material used	Depth Interval
3	2" DML Retr. Tubing Gun	512 - 522	Frac - 50 Sacks Sand	512 - 522

INITIAL PRODUCTION

Date of first production	Producing method (indicate if flowing, gas lift or pumping—if pumping, show size & type of pump:)					
August 1982	Pumping Churchhill #3					
Date of test	Hrs. tested	Choke size	Oil prod. during test bbls.	Gas prod. during test MCF	Water prod. during test bbls.	Oil gravity API (Corr)
			10 bbls.	0 MCF	20 bbls	24
Tubing pressure	Casing pressure	Cal'd rate of production per 24 hrs.	Oil	Gas	Water	Gas-oil ratio
			10 bbls.	0 MCF	20 bbls	

Disposition of gas (state whether vented, used for fuel or sold): Vented

Method of disposal of mud pit contents: Buried

CERTIFICATE: I, the undersigned, state that I am the President of the General Energy, Inc. (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.

RECEIVED

NOV 05 1982

Albert McHown
Signature

MO. OIL & GAS COUNCIL

DETAIL OF FORMATIONS PENETRATED

Formation	Top	Bottom	Description*
Top Soil	0	7	
Shale	17	24	
Red Bed	1	25	
Shale	7	32	
Red Bed	4	36	
Lime	4	41	
Shale	1	42	
Coal Break	1	43	
Shale	46	89	
Lime	2	91	
Shale	10	101	
Lime	2	103	
Shale	3	106	
Lime	10	116	
Shale	4	120	
Lime	12	132	
Shale	7	139	
Lime	16	155	
Shale	4	159	
Lime	3	162	
Shale	4	166	
Lime	7	173	
Shale	102	275	
Sandy Shale	37	312	
Shale w/Lm Stks	47	350	
Lime	5	364	
Shale	3	367	
Lime Streaks	10	377	
Lime	14	391	
Snd, Lm & Shale	3	394	
Sand and Shale	3	397	
Dark Shale	10	407	
Lime	5	412	
Shale	15	427	
Lime Streaks	22	449	
Lime and Shale	6	455	
Lm, Sh and Snd	7	462	
Sandy	6	468	
Snd, Sh and Lime	2	470	
Sand and Shale	15	485	
Shale	5	490	
Core #1	20	510	
Core #2	19	529	
Sand and Shale	10	539	
Shale	31	570	
T.D.		570'	

*Show all important zones of porosity, detail of all cores, and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures, and recoveries.

INSTRUCTIONS:

Attach driller's log or other acceptable log of well if available.



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

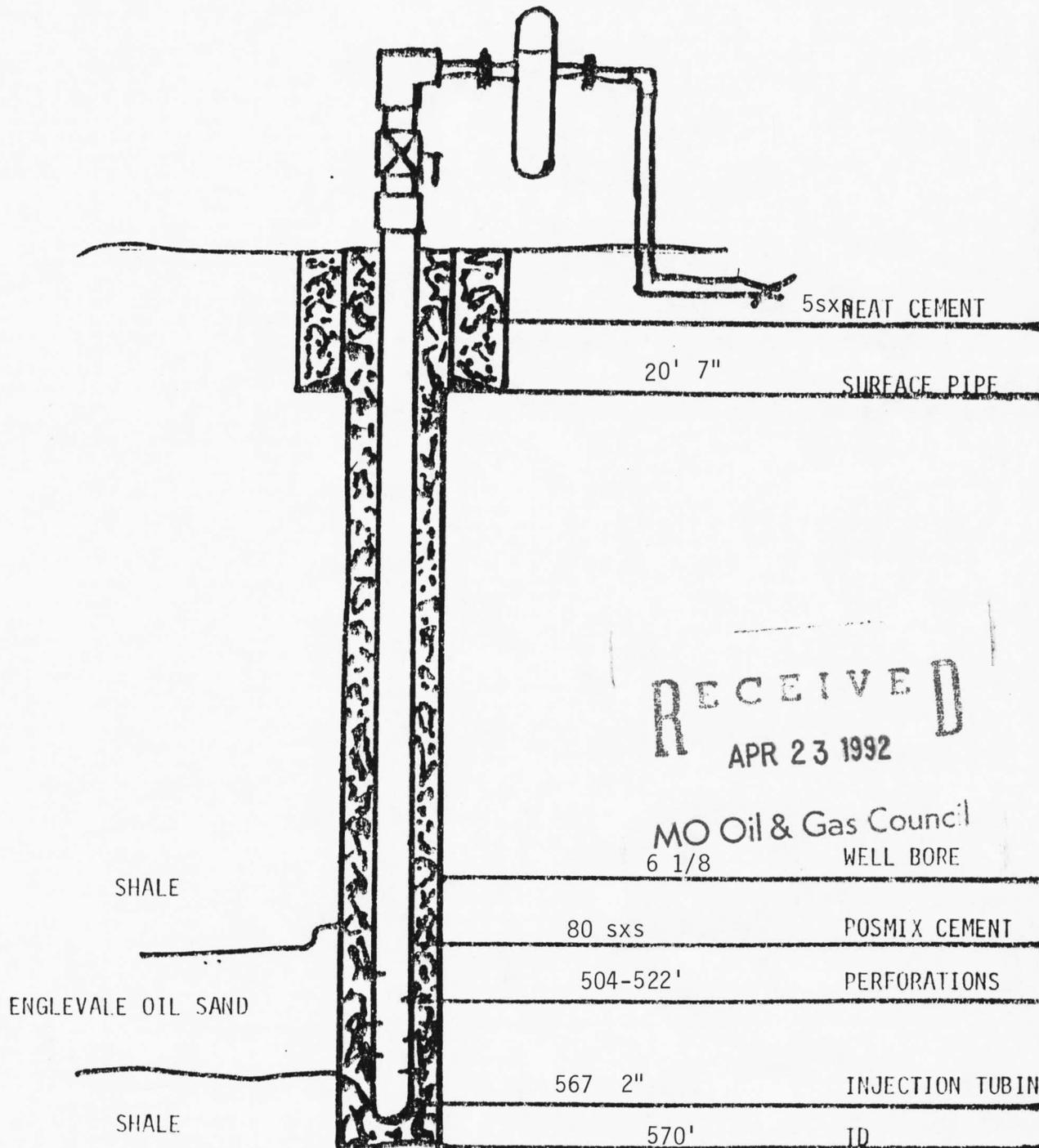
FORM OGC-7

OWNER Colt Energy, Inc.		ADDRESS 304 N Jefferson, Iola, KS 66749			
NAME OF LEASE Knoche		WELL NUMBER 3	PERMIT NUMBER (OGC-3 OR OGC-31 NUMBER) 20356		
LOCATION OF WELL 671FSL 2487FWL		SEC-TWP-RNG OR BLOCK & SURVEY 4-46-33		COUNTY Cass	
APPLICATION TO DRILL THIS WELL WAS FILED IN NAME OF General Energy, Inc.		HAS THIS WELL EVER PRODUCED OIL OR GAS? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	CHARACTER OF WELL AT COMPLETION (INITIAL PRODUCTION) OIL (BBLS/DAY) 10		DRY? No
DATE ABANDONED 6-19-97	TOTAL DEPTH 570	AMOUNT WELL PRODUCING PRIOR TO ABANDONMENT OIL (BBLS/DAY) N/A		GAS (MCF/DAY) N/A	
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	
Squirrel		Oil		512-522	
Size, kind, & depth of plugs used, giving amount 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
7"	20'		20'		
2-7/8"	567'		567'		Ran 1" inside 2" to TD & pumped 20sxs cement to surface Pulled out 1" hooked on to 2" squeezed well closed in @500PSI Well Plugged
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	
				RECEIVED JUL 24 1997 MO Oil & Gas Council	
METHOD OF DISPOSAL OF MUD PIT CONTENTS		Pumped out Pushed in			
NOTE FILE THIS FORM IN DUPLICATE WITH. (USE REVERSE SIDE FOR ADDITIONAL DETAIL)					
CERTIFICATE I, the undersigned, state that I am the Agent of the Colt Energy, Inc. (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 <i>Dennis Deshner</i>				DATE 7-22-97	



MISSOURI DEPARTMENT OF NATURAL RESOURCES
 MISSOURI OIL AND GAS COUNCIL
 INJECTION WELL SCHEMATIC

COUNTY Cass	PERMIT NUMBER 20356	OPERATOR Colt Energy, Inc.	WELL NUMBER Knoche 3
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RECEIVED
 APR 23 1992

MO Oil & Gas Council
 6 1/8" WELL BORE

80 sxs POSMIX CEMENT

504-522' PERFORATIONS

567 2" INJECTION TUBING

570' ID

INSTRUCTIONS ON THE ABOVE SPACE DRAW A NEAT, ACCURATE SCHEMATIC DIAGRAM OF THE APPLICANT INJECTION WELL, INCLUDING THE FOLLOWING: CONFIGURATION OF WELL HEAD, TOTAL DEPTH OR PLUG BACK TOTAL DEPTH, DEPTH OF ALL INJECTION OR DISPOSAL INTERVALS, AND THEIR FORMATION NAMES, LITHOLOGY OF ALL FORMATIONS PENETRATED, DEPTHS OF THE TOPS AND BOTTOMS OF ALL CASING AND TUBING, SIZE AND GRADE OF ALL CASING AND TUBING, AND THE TYPE AND DEPTH OF PACKER, DEPTH, LOCATION, AND TYPE OF ALL CEMENT, DEPTH OF ALL PERFORATIONS AND SQUEEZE JOBS, AND GEOLOGIC NAME AND DEPTH TO BOTTOM OF ALL UNDERGROUND SOURCES OF DRINKING WATER WHICH MAY BE AFFECTED BY THE INJECTION. USE BACK IF ADDITIONAL SPACE IS NEEDED, OR ATTACH SHEET

Temporary No. _____

MISSOURI GEOLOGICAL SURVEY AND WATER RESOURCES, ROLLA, MISSOURI

COUNTY Cass
 COMPANY OR OWNER Prairie Energy Corp.
 FARM Knoche WELL NO. # 3
 LOCATION 671'ESL, 2487'FWL SEC 4 T 46 R 33
 CONTRACTOR/DRILLER _____
 COMMENCED 6-7-82 COMPLETED 6-9-82
 PRODUCTION Oil - 10 bbls./day
 CASING RECORD _____
 WATER RECORD _____
 SOURCE OF LOG _____
 REMARKS OGC # 20356

MGS LOG NO. Driller's

+	-	-	-	-
+	-	-	-	-
+	-	-	-	-
+	-	-	-	-

ELEV. 995'
 TOTAL DEPTH 570'
 SWL _____

NO. SAMPLES _____ SAMPLES RECEIVED _____

FORMATION	FROM (ft)	TO (to)	FORMATION	FROM (ft)	TO (to)
Top soil	0	7	Sand & shale	394	397
Shale	7	24	Dark shale	397	407
Red bed	24	25	Lime	407	412
Shale	25	32	Shale	412	427
Red bed	32	36	Lime streaks	427	449
Lime	36	41	Lime and shale	449	455
Shale	41	42	Lime, shale & sand	455	462
Coal Break	42	43	Sandy	462	468
Shale	43	89	Sand, shale & lime	468	470
Lime	89	91	Sand and shale	470	485
Shale	91	101	Shale	485	490
Lime	101	103	Core # 1	490	510
Shale	103	106	Core # 2	510	529
Lime	106	116	Sand & shale	529	539
Shale	116	120	Shale	539	570
Lime	120	132			
Shale	132	139			
Lime	139	155			
Shale	155	159			
Lime	159	162			
Shale	162	166			
Lime	166	173			
Shale	173	275			
Sandy shale	275	312			
Shale w/lime streaks	312	350			
Lime	350	364			
Shale	364	367			
Lime streaks	367	377			
Lime	377	391			
Sand, lime & shale	391	394			
				T.D.	570'

COLT

ENERGY, INC.

CORPORATE OFFICE

P.O. Box 388 • 304 N. Jefferson • Iola, Ks. 66749
Phone (316) 365-3111 • Fax (316) 365-3170

April 20, 1992

Mr. Ken Deason
Missouri Oil and Gas Council
P.O. Box 250
Rolla, MO. 65401

Dear Ken:

On April 14, 1992, Matie Stephens, well servicing operator for Colt Energy, Inc. MIT'd Maclaughlin 2K, 4K and Knoche 1, 3 and filed the following report to our office:

Maclaughlin

2K	Pressured up to & held at 660PSI
4K	Pressured up to & held at 675PSI

Knoche

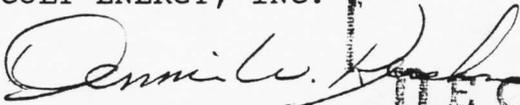
1	Pressured up to & held at 680PSI
3	Pressured up to & held at 645PSI

For your convenience, find enclosed the approved conversion injection well permit dated February 6, 1985 for Maclaughlin 2K. Also enclosed are the conversion injection well permit applications for Maclaughlin 4K and Knoche wells 1 and 3.

Notice was placed in the paper on April 17, 1992 and a copy of the Affidavit of Publication will be mailed to you as soon as is received in this office.

If you have any questions, contact Dennis Kershner at 316-365-3111.

Sincerely,
COLT ENERGY, INC.


Dennis W. Kershner

RECEIVED
APR 23 1992

DW/ss

MO Oil & Gas Council

Permit #: 20356

Date Issued: 6-1-82

County: Cass

Date Cancelled:

CONFIDENTIAL UNTIL:

Date Plugged:

COMMENTS:

striped 7-5-84
converted to
injection

OGC FORMS	Date Received
1	
2	5
3	
3i	5-28-82
4	4-23-92
4i	5-11-92
5	11-5-82
6	5-11-92
7	
8	
11	
12	4-23-92
Misc. Form 2	

	TYPE	ID #	Date Received
Logs	drillers		
Samples	chip core		
Analyses	water		
	core		
Additional Submitted Data:			



RECORDER CHART M3181-X
LLF18103

G-8 (12 HOUR)

Geolograph Logging Services Chart

CHANGE CHARTS AT 800 A. M. AND 800 P. M.

OPERATOR

BO LEASE **KNOCKE**

SEC T R

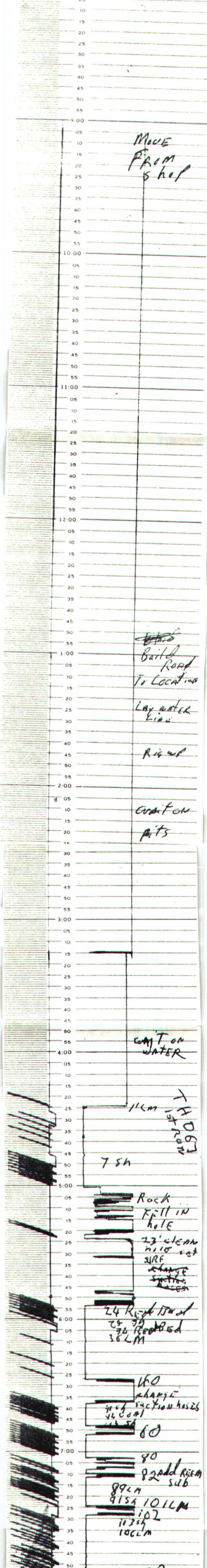
JNTY STATE **Mo**

L ON **June 7, 82** T. D. OFF

E ON **11 A M** 8 P M T. D. ON **0.**

AS TIME

DR LG OPERATIONS



Geolograp' Mining Services Chart

CHANGE CHARTS AT 800 A. M. AND 800 P. M.

OPERATOR _____

NO. 17117 LEASE KNOX

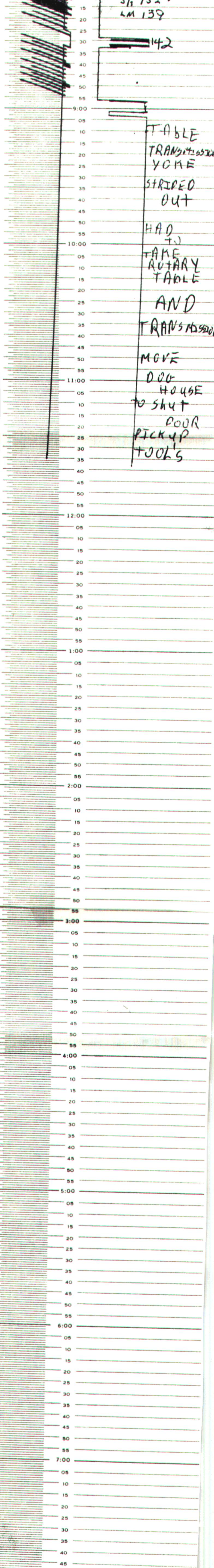
LOC _____ SEC _____ T _____ R _____

COUNTY _____ STATE ME

DATE ON 4/7/82 T. D. OFF _____

TIME ON B A M P M T. D. OFF _____

DRILLING TIME _____ DRILL OPERATIONS _____



LM
5/1/82
LM 139

TABLE
TRANSMISSION
YCKE
STRIPED
OUT

HAD
TO
TAKE
AUTARY
TABLE

AND
TRANSMISSION

MOVE
DOOR
HOUSE
TO SHUT
POOR
PICKUP
TOOLS



RECORDER CHART M3181-X

LLF18103

G-8 (12 HOUR)

Geolograph Logging Services Chart

CHANGE CHARTS AT 800 A.M. AND 800 P.M.

OPERATOR _____

NO. 3 #1 LEASE KNOCHI

LOC _____ SEC _____ T _____ R _____

COUNTY CASS STATE MODATE ON 8/9/82 T. D. OFF _____TIME ON 1:17 A.M. 8 P.M. T. D. ON 1982

DRILLING TIME _____ DRILLING OPERATIONS _____

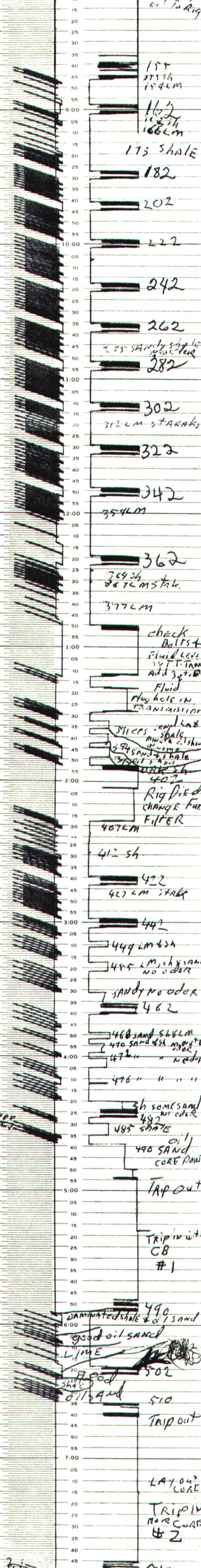


CHART NO.

Geolograp Lining Services Chart

CHANGE CHARTS AT 8:00 A. M. AND 8:00 P. M.

OPERATOR *[Signature]* LEASE **KNOCHÉ**

SEC _____ T _____ R _____
 COUNTY **JACKSON** STATE _____
 DATE ON **6-9-82** T. D. OFF _____
 TIME ON **7:19** P. M. T. D. ON _____

