

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 Shiloh Resources, Inc. DATE 2/6/85
American Bank Center Ste. 610 Casper Wyoming
 Address City State

DESCRIPTION OF WELL AND LEASE			
Name of lease <u>Richards Gebau Airforce Base</u>	Well number <u>3</u>	Elevation (ground) <u>1083.06'</u>	
WELL LOCATION (give footage from section lines) <u>1480</u> ft. from (N) (S) sec. line <u>1320</u> ft. from (E) (W) sec. line			
WELL LOCATION Section <u>10</u> Township <u>46N</u> Range <u>33W</u>		County <u>Cass</u>	
Nearest distance from proposed location to property or lease line <u>800</u> feet		Distance from proposed location to nearest drilling completed or applied for well on the same lease <u>345</u> feet	
Proposed depth <u>900'</u>	Drilling contractor, name & address <u>Cassady Drilling Ottawa, Kansas</u>	Rotary or Cable Tools <u>Rotary</u>	Approx. date work will start <u>3/1/85</u>
Number of acres in lease <u>1326</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 <u>N/A</u>		Name _____ No. of Wells: producing _____ Address _____ injection _____ inactive _____ abandoned _____	
Status of Bond <u>N/A</u> Single Well <input type="checkbox"/> Amt. _____ Blanket Bond <input type="checkbox"/> Amt. _____		<input 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.	size	wt/ft	cem.
<u>20'</u>	<u>7"</u>	<u>23 lbs</u>	<u>0-20'</u>
<u>800'</u>	<u>2 7/8"</u>	<u>6.4 lbs</u>	<u>0-800'</u>
_____	_____	_____	_____
_____	_____	_____	_____
I, the undersigned, state that I am the <u>Geologist</u> of the <u>Shiloh Resources</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>Mark Swager</u>			

Permit Number 20485 Drillers log required Drill stem test info. required if run
 Approval Date 5/10/85 E-logs required if run Samples required
 Approved By Wallace B. Howard 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

RECEIVED
 FEB 14 1985

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.



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

FORM OGC-7

OWNER Shiloh Resources, Inc.		ADDRESS American Bank Center, 610 Casper, WY	
NAME OF LEASE Richard Gebaur		WELL NUMBER 3	PERMIT NUMBER (OGC-3 OR OGC-3I NUMBER)
LOCATION OF WELL S. 10 T. 44N, R33W		SEC-TWP-RNG OR BLOCK & SURVEY	COUNTY Jackson
APPLICATION TO DRILL THIS WELL WAS FILED IN NAME OF		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 (BBLS/DAY) GAS (MCF/DAY)
DATE ABANDONED 11/85		TOTAL DEPTH 800	AMOUNT WELL PRODUCING PRIOR TO ABANDONMENT OIL (BBLS/DAY) GAS (MCF/DAY)
			WATER (BBLS/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.
Plugged to surface, see drilling log for formations encountered.			

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
Plugged from Total Depth to Surface.					

WAS WELL FILLED WITH MUD-LADEN FLUID? Cement	INDICATE DEEPEST FORMATION CONTAINING FRESH WATER
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NAME AND ADDRESSES OF ADJACENT LEASE OPERATORS OR OWNERS OF THE SURFACE

NAME	ADDRESS	DIRECTION FROM THIS WELL
As above		

METHOD OF DISPOSAL OF MUD PIT CONTENTS	back-fill into pits
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NOTE FILE THIS FORM IN DUPLICATE WITH (USE REVERSE SIDE FOR ADDITIONAL DETAIL)

CERTIFICATE I, the undersigned, state that I am the GEOLOGIST 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 <i>Mark Swigon</i>	DATE 11/85
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Permit #: 20485

Date Issued: 5-10-85

County: Cass

Date Cancelled:

CONFIDENTIAL UNTIL:

Date Plugged: 11-85

COMMENTS:

OGC FORMS	Date Received
1	
2	
3	
3i	2-14-85
4	
4i	
5	
6	
7	11-85
8	
11	
12	
Misc. Form 2	

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