



WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # _____

Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____ + _____

Contact Person: _____

Phone: (_____) _____

CONTRACTOR: License # _____

Name: _____

Wellsite Geologist: _____

Purchaser: _____

Designate Type of Completion:

- New Well Re-Entry Workover
- Oil WSW SWD SIOW
- Gas D&A ENHR SIGW
- OG GSW Temp. Abd.
- CM (Coal Bed Methane)
- Cathodic Other (Core, Expl., etc.): _____

If Workover/Re-entry: Old Well Info as follows:

Operator: _____

Well Name: _____

Original Comp. Date: _____ Original Total Depth: _____

- Deepening Re-perf. Conv. to ENHR Conv. to SWD
- Conv. to GSW
- Plug Back: _____ Plug Back Total Depth _____
- Commingled Permit #: _____
- Dual Completion Permit #: _____
- SWD Permit #: _____
- ENHR Permit #: _____
- GSW Permit #: _____

Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

API No. 15 - _____

Spot Description: _____

_____ - _____ - _____ Sec. _____ Twp. _____ S. R. _____ East West

_____ Feet from North / South Line of Section

_____ Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: _____

Lease Name: _____ Well #: _____

Field Name: _____

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total Depth: _____ Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: _____ Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from: _____

feet depth to: _____ w/ _____ sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: _____ ppm Fluid volume: _____ bbls

Dewatering method used: _____

Location of fluid disposal if hauled offsite: _____

Operator Name: _____

Lease Name: _____ License #: _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West

County: _____ Permit #: _____

AFFIDAVIT

I am the affiant and I hereby certify that all requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Submitted Electronically

KCC Office Use ONLY

- Letter of Confidentiality Received
Date: _____
- Confidential Release Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT I II III Approved by: _____ Date: _____



1053474

Operator Name: _____ Lease Name: _____ Well #: _____

Sec. _____ Twp. _____ S. R. _____ East West County: _____

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface test, along with final chart(s). Attach extra sheet if more space is needed. Attach complete copy of all Electric Wire-line Logs surveyed. Attach final geological well site report.

| | |
|---|---|
| Drill Stem Tests Taken <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Submitted Electronically <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run: | <input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum |
|---|---|

| CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> Used | | | | | | | |
|---|-------------------|---------------------------|-------------------|---------------|----------------|--------------|----------------------------|
| Report all strings set-conductor, surface, intermediate, production, etc. | | | | | | | |
| Purpose of String | Size Hole Drilled | Size Casing Set (In O.D.) | Weight Lbs. / Ft. | Setting Depth | Type of Cement | # Sacks Used | Type and Percent Additives |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

| ADDITIONAL CEMENTING / SQUEEZE RECORD | | | | |
|--|------------------|----------------|--------------|----------------------------|
| Purpose: | Depth Top Bottom | Type of Cement | # Sacks Used | Type and Percent Additives |
| _____ Perforate _____ Protect Casing _____ Plug Back TD _____ Plug Off Zone | | | | |
| | | | | |

| Shots Per Foot | PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated | Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i> | Depth |
|----------------|---|--|-------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

TUBING RECORD: Size: _____ Set At: _____ Packer At: _____ Liner Run: Yes No

Date of First, Resumed Production, SWD or ENHR. _____ Producing Method: Flowing Pumping Gas Lift Other *(Explain)* _____

| | | | | | |
|-----------------------------------|-----------|---------|-------------|---------------|---------|
| Estimated Production Per 24 Hours | Oil Bbls. | Gas Mcf | Water Bbls. | Gas-Oil Ratio | Gravity |
|-----------------------------------|-----------|---------|-------------|---------------|---------|

| | | |
|---|--|--|
| DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i> | METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____ <input type="checkbox"/> Other <i>(Specify)</i> _____ | PRODUCTION INTERVAL: _____ _____ |
|---|--|--|



CHARGE TO: Eternity Exploration
 ADDRESS: _____
 CITY, STATE, ZIP CODE: _____

TICKET
19531
 PAGE 1 OF 2

| | | | | | | | |
|---|--|-------------------------------------|------------------------------------|--------------------------|---------------------------------|------------------------|-----------------------|
| 1. SERVICE LOCATIONS <u>Hays, KS</u> | WELL/PROJECT NO. <u>#1</u> | LEASE <u>Beth With</u> | COUNTY/PARISH <u>Graham</u> | STATE <u>KS</u> | CITY <u>Lawrence</u> | DATE <u>2-22-11</u> | OWNER <u>Sarah</u> |
| 2. <u>Ness City, KS</u> | TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES | CONTRACTOR <u>W P W HG</u> | RIG NAME NO. <u>Development</u> | SHIPPED VIA <u>CH</u> | DELIVERED TO <u>Lawrence</u> | ORDER NO. | |
| 3. REFERRAL LOCATION | WELL TYPE <u>oil</u> | WELL CATEGORY <u>Development</u> | JOB PURPOSE <u>2-5 stage</u> | WELL PERMIT NO. | | WELL LOCATION | |
| 4. INVOICE INSTRUCTIONS | | | | | | | |

| PRICE REFERENCE | SECONDARY REFERENCE/ PART NUMBER | LOC | ACCT | DF | DESCRIPTION | QTY | UM | QTY | UM | UNIT PRICE | AMOUNT |
|-----------------|----------------------------------|-----|------|----|--------------------------|-----|-----|------|----|------------|---------|
| 575 | | | | | MILEAGE #111 | 60 | mi | | | 5.00 | 300.00 |
| 579 | | | | | Pump Charge (2-Stage) | 1 | ea | 4070 | ' | 1750.00 | 1750.00 |
| 221 | | | | | KCL | 2 | gal | | | 25.00 | 50.00 |
| 281 | | | | | Mudflash | 5 | gal | | | 35.00 | 175.00 |
| 290 | | | | | D-Air | 4 | gal | | | 35.00 | 140.00 |
| 402 | | | | | Catalyzers | 10 | ea | 52 | " | 55.00 | 550.00 |
| 405 | | | | | Baskets | 2 | ea | | | 200.00 | 400.00 |
| 407 | | | | | Insert Flat Shoe w/ Ball | 1 | ea | | | 275.00 | 275.00 |
| 408 | | | | | DV Tool w/ Plugset | 1 | ea | | | 2600.00 | 2600.00 |
| 411 | | | | | Recipo | 30 | ea | | | 45.00 | 1350.00 |
| 417 | | | | | DV L.D. Plug & Barrel | 1 | ea | | | 200.00 | 200.00 |
| 580 | | | | | Additional Hrs | 1 | hrs | | | 200.00 | 200.00 |

LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, **PAYMENT, RELEASE, INDEMNITY**, and **LIMITED WARRANTY** provisions.

MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

DATE SIGNED: 2-22-11 TIME SIGNED: 1345 AM PM

REMIT PAYMENT TO:
 SWIFT SERVICES, INC.
 P.O. BOX 466
 NESS CITY, KS 67560
 785-798-2300

SURVEY:
 OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN? YES NO
 WE UNDERSTOOD AND MET YOUR NEEDS? YES NO
 OUR SERVICE WAS PERFORMED WITHOUT DELAY? YES NO
 THE OPERATOR OF THE EQUIPMENT AND PERSONNEL ARE SATISFACTORILY? YES NO
 ARE YOU SATISFIED WITH OUR SERVICE? YES NO

CUSTOMER DID NOT WISH TO RESPOND

SWIFT OPERATOR: Neil Wolfe APPROVAL: _____

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES: The customer hereby acknowledges receipt of the materials and services listed on this ticket.

TOTAL: 17,466.01

Thank You!

JOB LOG

SWIFT Services, Inc.

DATE **2-22-11** PAGE NO. **1**

CUSTOMER **Eternity Exploration** WELL NO. **#1** LEASE **Betty Worth** JOB TYPE **2-stage** TICKET NO. **19531**

| CHART NO. | TIME | RATE (BPM) | VOLUME (BBL) (GAL) | PUMPS | | PRESSURE (PSI) | | DESCRIPTION OF OPERATION AND MATERIALS |
|-----------|------|------------|--------------------|-------|---|----------------|--------|--|
| | | | | T | C | TUBING | CASING | |
| | 0500 | | | | | | | on loc w/FE |
| | | | | | | | | RTD 4070' |
| | | | | | | | | 5 1/2" x 14# x 4070' x 35' |
| | | | | | | | | Scratchers 1-7 4ft or |
| | | | | | | | | Cent. 1-8, 10, 44 |
| | | | | | | | | Basket 99, 45 |
| | | | | | | | | D.W. 99 @ 2119' |
| | 0615 | | | | | | | Start Float Equipment |
| | 0815 | | | | | | | Break circulation |
| | 1015 | 4 | 0 | | | 200 | | Start Pre-flushes ^{500 gal Mud Flush} 20 1/2" KCL Flush |
| | 1023 | 5.5 | 32/0 | | | 250 | | Start Cement 150 sks EA-2 |
| | 1028 | | 36 | | | | | End Cement |
| | | | | | | | | wash Pk / Drop LD Plug |
| | 1030 | 6 | 0 | | | 200 | | Start Displacement 48 hrs - 50.5 mud |
| | 1041 | 5 | 68 | | | 300 | | Catch cement |
| | 1047 | | 98.5 | | | 200 / 2400 | | Land Plug |
| | | | | | | | | Release pressure |
| | | | | | | | | Float Held |
| | | | | | | | | Drop Opening Plug / wash up Trk |
| | 1100 | | | | | 1000 | | Open DV / Circ 1 1/2 hrs |
| | | | | | | | | Plug BH 25 sks EA-2 |
| | 1240 | 4 | 0 | | | 100 | | Start KCL Flush |
| | 1245 | 5 | 20/0 | | | 150 | | Start Cement 225 sks SMD |
| | 1315 | | 125 | | | | | End Cement |
| | | | | | | | | Drop Closing Plug |
| | 1318 | 5 | 0 | | | | | Start Displacement |
| | | 4 | 10 | | | | | Circ. Cement |
| | 1332 | | 52 | | | | | Land Plug |
| | | | | | | | | |
| | | | | | | | | circ 70 sks to pit |
| | | | | | | | | |
| | | | | | | | | Thank you |
| | | | | | | | | Nick, Josh F. & John |

REMIT TO
RR 1 BOX 90 D
HOXIE KS 67740

SCHIPPERS OIL FIELD SERVICE L.L.C.

492

| | | | | | | |
|--------------------------|--------------|------------------------|-----------------|-------------|-----------------|-----------------|
| DATE <u>2/15/11</u> | SEC <u>7</u> | RANGE/TWP. <u>N 25</u> | CALLED OUT | ON LOCATION | JOB START | JOB FINISH |
| LEASE <u>Betty Worth</u> | | | WELL # <u>1</u> | | COUNT# <u>4</u> | STAKE# <u>5</u> |

| | | | | |
|------------------------------|------------------|----------------|------------|------------------------------|
| CONTRACTOR <u>W W 6</u> | OWNER | | | |
| TYPE OF JOB | | | | |
| HOLE SIZE <u>12 1/4</u> | T.D. <u>234</u> | CEMENT | <u>160</u> | |
| CASING SIZE <u>8 7/8</u> | DEPTH <u>227</u> | AMOUNT ORDERED | | |
| TUBING SIZE | DEPTH | | | |
| DRILL PIPE <u>4 1/2</u> | DEPTH | | | |
| TOOL | DEPTH | | | |
| PRES. MAX | MINIMUM | COMMON | <u>160</u> | @ <u>14.25</u> |
| DISPLACEMENT <u>13.5 bbl</u> | SHOE JOINT | POZMIX | | @ |
| CEMENT LEFT IN CSG. | | GEL | <u>3</u> | @ <u>26</u> |
| PERFS | | CHLORIDE | <u>5</u> | @ <u>52</u> |
| | | ASC | | @ |
| EQUIPMENT | | | | @ |
| PUMP TRUCK | | | | @ |
| # | | | | @ |
| BULK TRUCK | | | | @ |
| # | | | | @ |
| BULK TRUCK | | | | @ |
| # | | | | @ |
| | | | | @ |
| | | HANDLING | <u>168</u> | @ <u>1.92</u> <u>327.60</u> |
| | | MILEAGE | <u>31</u> | @ <u>15.22</u> <u>469.72</u> |
| | | TOTAL | | |

| | | | |
|---------------------------|------------------------|-----------|-----------------------------|
| REMARKS | SERVICE <u>Surface</u> | | |
| <u>Plug Down @ 10:45</u> | DEPT OF JOB | @ | |
| | PUMP TRUCK CHARGE | @ | <u>750.00</u> |
| | EXTRA FOOTAGE | @ | |
| | MILEAGE | <u>31</u> | @ <u>6.22</u> <u>201.00</u> |
| <u>Circ Cement to Pit</u> | MANIFOLD | @ | |
| | | @ | |
| | TOTAL | | |

| | |
|----------------------------|-------|
| CHARGE TO: <u>Eternity</u> | |
| STREET | STATE |
| CITY | ZIP |

To: Schippers Oil Field Service LLC
You are hereby requested to rent cementing equipment and furnish staff to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

| | |
|-------------------------------|---|
| PLUG & FLOAT EQUIPMENT | |
| | @ |
| | @ |
| | @ |
| | @ |
| | @ |
| | @ |
| TOTAL | |
| TAX | |
| TOTAL CHARGE | |
| DISCOUNT (IF PAID IN 20 DAYS) | |

SIGNATURE Mark Biggo

PRINTED NAME Mark Biggo



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

Eternity Exploration, LLC

Betty Werth #1

338 Spyglass Dr.
Coppell, TX 75019

7/10s/25w Graham KS

ATTN: Jim Musgrove

Job Ticket: 040831

DST#: 1

Test Start: 2011.02.19 @ 12:30:00

GENERAL INFORMATION:

Formation: **Toronto - LKC "D"**
 Deviated: No Whipstock: ft (KB)
 Time Tool Opened: 14:51:00
 Time Test Ended: 20:23:00
 Interval: **3751.00 ft (KB) To 3864.00 ft (KB) (TVD)**
 Total Depth: 3864.00 ft (KB) (TVD)
 Hole Diameter: 7.88 inches Hole Condition: Fair
 Test Type: Conventional Bottom Hole
 Tester: James Winder
 Unit No: 46
 Reference Elevations: 2548.00 ft (KB)
 2543.00 ft (CF)
 KB to GR/CF: 5.00 ft

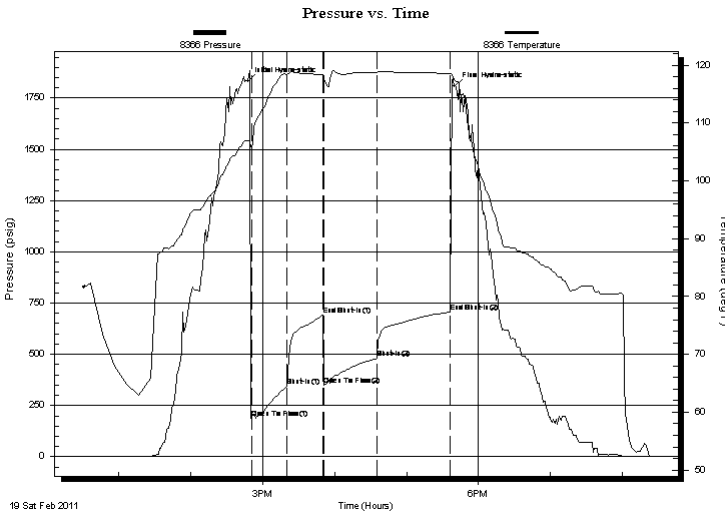
Serial #: 8366

Inside

Press @ Run Depth: 479.51 psig @ 3752.00 ft (KB) Capacity: 8000.00 psig
 Start Date: 2011.02.19 End Date: 2011.02.19 Last Calib.: 2011.02.19
 Start Time: 12:30:05 End Time: 20:22:59 Time On Btm: 2011.02.19 @ 14:48:00
 Time Off Btm: 2011.02.19 @ 17:40:00

TEST COMMENT: IF: Blow built to BOB (11 1/2") in 2 1/2 min.
 IS: Bled off for 5 min., Blow back built to BOB in 8 3/4 min.
 FF: Blow built to BOB in 2 1/4 min.
 FS: Bled off in 3 min., Blow back built to BOB in 9 m

PRESSURE SUMMARY



| Time (Min.) | Pressure (psig) | Temp (deg F) | Annotation |
|-------------|-----------------|--------------|----------------------|
| 0 | 1831.04 | 106.84 | Initial Hydro-static |
| 3 | 185.67 | 105.86 | Open To Flow (1) |
| 33 | 344.65 | 118.27 | Shut-In(1) |
| 62 | 690.26 | 118.34 | End Shut-In(1) |
| 63 | 349.92 | 118.06 | Open To Flow (2) |
| 108 | 479.51 | 118.79 | Shut-In(2) |
| 169 | 706.40 | 118.52 | End Shut-In(2) |
| 172 | 1806.64 | 117.43 | Final Hydro-static |

Recovery

| Length (ft) | Description | Volume (bbl) |
|-------------|------------------------------|--------------|
| 124.00 | GWMO 37%o, 29%m, 17%w, 17%g | 0.61 |
| 62.00 | SW/GOM 33%m, 30%g, 28%o, 9%w | 0.87 |
| 124.00 | GMCO 53%o, 30%g, 17%m | 1.74 |
| 248.00 | GOM 49%m, 35%o, 16%g | 3.48 |
| 687.00 | CGO 55%o, 41%g, 4%m | 9.64 |
| 0.00 | GIP = 2503 | 0.00 |

Gas Rates

| Choke (inches) | Pressure (psig) | Gas Rate (Mcf/d) |
|----------------|-----------------|------------------|
| | | |



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

FLUID SUMMARY

Eternity Exploration, LLC

Betty Werth #1

338 Spyglass Dr.
Coppell, TX 75019

7/10s/25w Graham KS

Job Ticket: 040831

DST#: 1

ATTN: Jim Musgrove

Test Start: 2011.02.19 @ 12:30:00

Mud and Cushion Information

| | | |
|----------------------------------|----------------------------|---------------------|
| Mud Type: Gel Chem | Cushion Type: | Oil API: 38 deg API |
| Mud Weight: 9.00 lb/gal | Cushion Length: ft | Water Salinity: ppm |
| Viscosity: 59.00 sec/qt | Cushion Volume: bbl | |
| Water Loss: 6.00 in ³ | Gas Cushion Type: | |
| Resistivity: ohm.m | Gas Cushion Pressure: psig | |
| Salinity: 3300.00 ppm | | |
| Filter Cake: 2.00 inches | | |

Recovery Information

Recovery Table

| Length ft | Description | Volume bbl |
|--------------|------------------------------|---------------|
| 124.00 | GWMO 37%o, 29%m, 17%w, 17%g | 0.610 |
| 62.00 | SW/GOM 33%m, 30%g, 28%o, 9%w | 0.870 |
| 124.00 | GMCO 53%o, 30%g, 17%m | 1.739 |
| 248.00 | GOM 49%m, 35%o, 16%g | 3.479 |
| 687.00 | CGO 55%o, 41%g, 4%m | 9.637 |
| 0.00 | GIP = 2503 | 0.000 |

Total Length: 1245.00 ft Total Volume: 16.335 bbl

Num Fluid Samples: 0

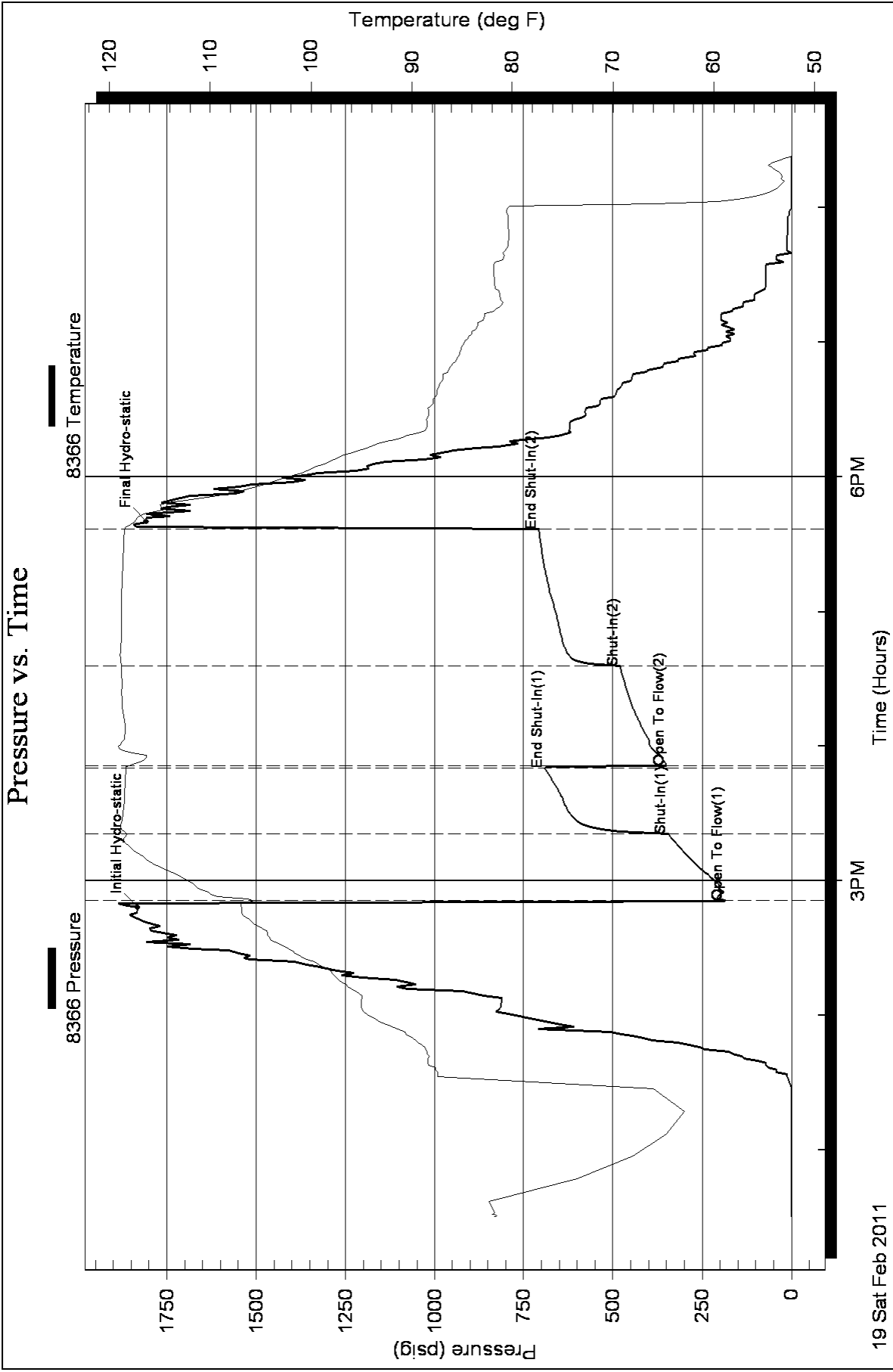
Num Gas Bombs: 0

Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments: Gravity = 37.2 api @ 52 deg F
Corrected Gravity = 38 api





**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

Eternity Exploration, LLC

Betty Werth #1

338 Spyglass Dr.
Coppell, TX 75019

7/10s/25w Graham KS

ATTN: Jim Musgrove

Job Ticket: 040832

DST#: 2

Test Start: 2011.02.20 @ 04:17:00

GENERAL INFORMATION:

Formation: **LKC "E"**

Deviated: No Whipstock: ft (KB)

Time Tool Opened: 05:54:00

Time Test Ended: 10:18:30

Test Type: Conventional Bottom Hole

Tester: James Winder

Unit No: 46

Interval: 3860.00 ft (KB) To 3888.00 ft (KB) (TVD)

Reference Elevations: 2548.00 ft (KB)

Total Depth: 3888.00 ft (KB) (TVD)

2543.00 ft (CF)

Hole Diameter: 7.88 inches Hole Condition: Fair

KB to GR/CF: 5.00 ft

Serial #: 8366

Inside

Press @ Run Depth: 130.25 psig @ 3861.00 ft (KB)

Capacity: 8000.00 psig

Start Date: 2011.02.20 End Date: 2011.02.20

Last Calib.: 2011.02.20

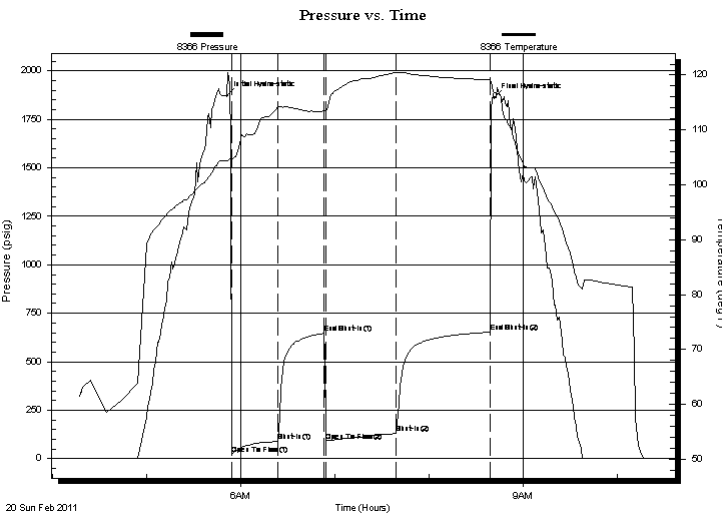
Start Time: 04:17:05 End Time: 10:18:29

Time On Btm: 2011.02.20 @ 05:51:00

Time Off Btm: 2011.02.20 @ 08:41:30

TEST COMMENT: IF: Blow built to 8 1/2"
IS: Bled off, No blow back
FF: Blow built to 8 1/2"
FS: Bled off, No blow back

PRESSURE SUMMARY



| Time (Min.) | Pressure (psig) | Temp (deg F) | Annotation |
|-------------|-----------------|--------------|----------------------|
| 0 | 1870.43 | 104.41 | Initial Hydro-static |
| 3 | 24.11 | 104.52 | Open To Flow (1) |
| 33 | 89.36 | 114.18 | Shut-In(1) |
| 62 | 646.69 | 113.53 | End Shut-In(1) |
| 63 | 91.65 | 113.68 | Open To Flow (2) |
| 108 | 130.25 | 120.43 | Shut-In(2) |
| 168 | 652.34 | 119.16 | End Shut-In(2) |
| 171 | 1860.78 | 116.81 | Final Hydro-static |

Recovery

| Length (ft) | Description | Volume (bbl) |
|-------------|----------------------------|--------------|
| 124.00 | MCW 84%w , 16%m, Trace oil | 0.61 |
| 111.00 | MCW 65%w , 35%m, Trace oil | 1.56 |
| | | |
| | | |
| | | |

Gas Rates

| Choke (inches) | Pressure (psig) | Gas Rate (Mcf/d) |
|----------------|-----------------|------------------|
| | | |



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

FLUID SUMMARY

Eternity Exploration, LLC

Betty Werth #1

338 Spyglass Dr.
Coppell, TX 75019

7/10s/25w Graham KS

Job Ticket: 040832

DST#: 2

ATTN: Jim Musgrove

Test Start: 2011.02.20 @ 04:17:00

Mud and Cushion Information

Mud Type: Gel Chem

Cushion Type:

Oil API:

deg API

Mud Weight: 9.00 lb/gal

Cushion Length:

ft

Water Salinity:

62000 ppm

Viscosity: 59.00 sec/qt

Cushion Volume:

bbbl

Water Loss: 5.99 in³

Gas Cushion Type:

Resistivity: ohm.m

Gas Cushion Pressure:

psig

Salinity: 3300.00 ppm

Filter Cake: 2.00 inches

Recovery Information

Recovery Table

| Length ft | Description | Volume bbl |
|--------------|----------------------------|---------------|
| 124.00 | MCW 84%w , 16%m, Trace oil | 0.610 |
| 111.00 | MCW 65%w , 35%m, Trace oil | 1.557 |

Total Length: 235.00 ft Total Volume: 2.167 bbl

Num Fluid Samples: 0

Num Gas Bombs: 0

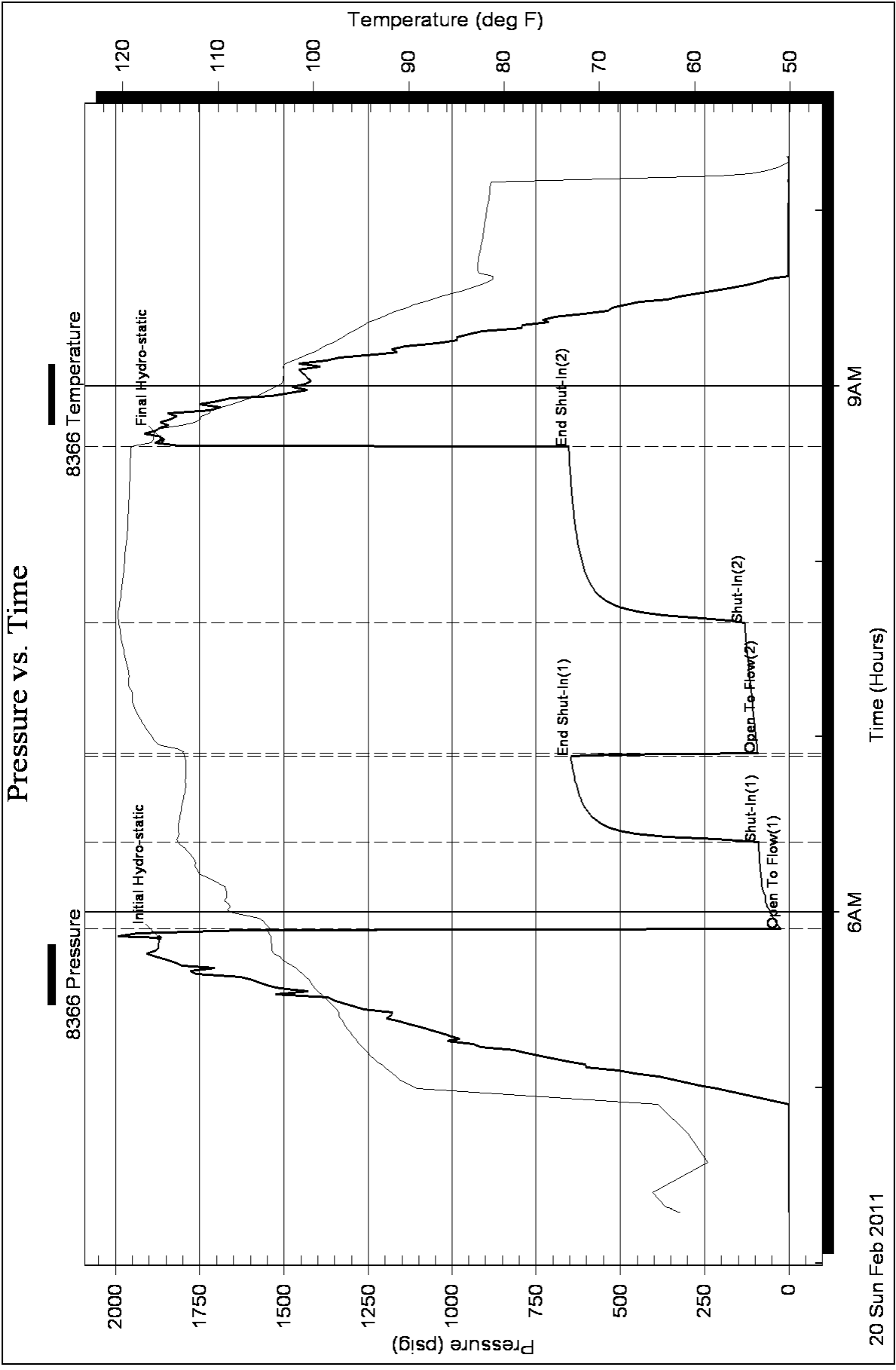
Serial #:

Laboratory Name:

Laboratory Location:

Recovery Comments: RW = .153 ohms @ 56 deg F

Chlorides = 62,000 ppm



Conservation Division
Finney State Office Building
130 S. Market, Rm. 2078
Wichita, KS 67202-3802



phone: 316-337-6200
fax: 316-337-6211
<http://kcc.ks.gov/>

Thomas E. Wright, Chairman
Ward Loyd, Commissioner

Corporation Commission

Sam Brownback, Governor

April 06, 2011

Carlo A. Ugolini
Eternity Exploration, LLC
338 Spyglass Dr
Coppell, TX 75019-5430

Re: ACO1
API 15-065-23715-00-00
Betty Werth 1
NE/4 Sec.07-10S-25W
Graham County, Kansas

Dear Production Department:

We are herewith requesting that the Well Completion Form ACO-1 and attached information for the subject well be held confidential for a period of two years.

Should you have any questions or need additional information regarding subject well, please contact our office.

Respectfully,
Carlo A. Ugolini