



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: _____



1060827

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: _____ _____
---	--	--

The Road to Excellence Starts with Safety

Sold To #: 305669	Ship To #: 2857074	Quote #:	Sales Order #: 8213371
Customer: STRAT LAND EXPL CO		Customer Rep:	
Well Name: Snake Creek Ranch		Well #: 1-10	API/UWI #:
Field:	City (SAP): BUFFALO	County/Parish: Harper	State: Oklahoma
Contractor: .KENAI		Rig/Platform Name/Num: 55	
Job Purpose: Cement Surface Casing			
Well Type: Development Well		Job Type: Cement Surface Casing	
Sales Person:		Srvc Supervisor: KLAUSE, JOHN	MBU ID Emp #: 456246

Job Personnel

HES Emp Name	Exp Hrs	Emp #	HES Emp Name	Exp Hrs	Emp #	HES Emp Name	Exp Hrs	Emp #
KLAUSE, JOHN David	12	456246	RALSTON, ANTHONY Kenneth	12	448065			

Equipment

HES Unit #	Distance-1 way	HES Unit #	Distance-1 way	HES Unit #	Distance-1 way	HES Unit #	Distance-1 way

Job Hours

Date	On Location Hours	Operating Hours	Date	On Location Hours	Operating Hours	Date	On Location Hours	Operating Hours

TOTAL Total is the sum of each column separately

Job				Job Times			
Formation Name	Formation Depth (MD)	Top	Bottom	Called Out	Date	Time	Time Zone
Form Type	1500. ft			On Location			
Job depth MD				Job Started			
Water Depth				Job Completed			
Perforation Depth (MD)	From	To		Departed Loc			

Well Data

Description	New / Used	Max pressure psig	Size in	ID in	Weight lbm/ft	Thread	Grade	Top MD ft	Bottom MD ft	Top TVD ft	Bottom TVD ft
Surface Open Hole				12.25					1500.		
Surface Casing	Unknown		8.625	8.097	24.		J-55		1500.		

Sales/Rental/3rd Party (HES)

Description	Qty	Qty uom	Depth	Supplier
SHOE,GID,8-5/8 8RD	1	EA		
CLR,FLT,TROPHY SEAL,8-5/8 8RD	1	EA		
CENTRALIZER ASSY - API - 8-5/8 CSG X	13	EA		
CLAMP - LIMIT - 8-5/8 - HINGED -	1	EA		
KIT,HALL WELD-A	2	EA		
PLUG,CMTG,TOP,8 5/8,HWE,7.20 MIN/8.09 MA	1	EA		

Tools and Accessories

Type	Size	Qty	Make	Depth	Type	Size	Qty	Make	Depth	Type	Size	Qty	Make
Guide Shoe					Packer					Top Plug			
Float Shoe					Bridge Plug					Bottom Plug			
Float Collar					Retainer					SSR plug set			
Insert Float										Plug Container			
Stage Tool										Centralizers			

Miscellaneous Materials

Gelling Agt	Conc	Surfactant	Conc	Acid Type	Qty	Conc	%
Treatment Fld	Conc	Inhibitor	Conc	Sand Type	Size	Qty	

Fluid Data

Stage/Plug #: 1										
Fluid #	Stage Type	Fluid Name	Qty	Qty uom	Mixing Density lbm/gal	Yield ft ³ /sk	Mix Fluid Gal/sk	Rate bbl/min	Total Mix Fluid Gal/sk	
1	Water Spacer		20.00	bbl	8.34	.0	.0	.0		
2	HALLIBURTON LIGHT STANDARD	HALLIBURTON LIGHT STANDARD - SBM (12313)	500.0	sacks	12.7	1.98	10.7		10.7	
3 %		CALCIUM CHLORIDE - HI TEST PELLET (100005053)								
0.25 lbm		POLY-E-FLAKE (101216940)								
10.699 Gal		FRESH WATER								
3	STANDARD	CMT - STANDARD CEMENT (100003684)	205.0	sacks	15.6	1.2	5.32		5.32	
94 lbm		CMT - STANDARD - CLASS A REG OR TYPE I, BULK (100003684)								
2 %		CALCIUM CHLORIDE - HI TEST PELLET (100005053)								
0.125 lbm		POLY-E-FLAKE (101216940)								
5.319 Gal		FRESH WATER								
4	Displacement		94.00	bbl	8.34	.0	.0	.0		
Calculated Values			Pressures			Volumes				
Displacement	94	Shut In: Instant	1500	Lost Returns		Cement Slurry	220	Pad		
Top Of Cement	SURFACE	5 Min	X	Cement Returns	20	Actual Displacement	94	Treatment		
Frac Gradient		15 Min		Spacers	20	Load and Breakdown		Total Job		
Rates										
Circulating	4	Mixing	5	Displacement	5	Avg. Job	4.5			
Cement Left In Pipe	Amount	40 ft	Reason	Shoe Joint						
Frac Ring # 1 @	ID	Frac ring # 2 @	ID	Frac Ring # 3 @	ID	Frac Ring # 4 @	ID			
The Information Stated Herein Is Correct				Customer Representative Signature						

The Road to Excellence Starts with Safety

Sold To #: 305669	Ship To #: 2857074	Quote #:	Sales Order #: 8241987
Customer: STRAT LAND EXPL CO		Customer Rep:	
Well Name: SNAKE CREEK RANCH		Well #: 1-10	API/UWI #:
Field:	City (SAP): BUFFALO	County/Parish: Clark	State Ks.
Contractor: Kenai		Rig/Platform Name/Num: 55	
Job Purpose: Cement Production Casing			
Well Type: Development Well		Job Type: Cement Production Casing	
Sales Person:		Srvc Supervisor: WOODROW, JOHN	MBU ID Emp #: 105848

Job Personnel

HES Emp Name	Exp Hrs	Emp #	HES Emp Name	Exp Hrs	Emp #	HES Emp Name	Exp Hrs	Emp #
JOHNSON, COREY Drew	17	495243	LEE, SEITH Adam	17	483600	NILES, CORY A	17	477973
WOODROW, JOHN Phillip	17	105848						

Equipment

HES Unit #	Distance-1 way	HES Unit #	Distance-1 way	HES Unit #	Distance-1 way	HES Unit #	Distance-1 way

Job Hours

Date	On Location Hou	Operating Hours	Date	On Location Hours	Operating Hours	Date	On Location Hours	Operating Hours
6/11/11	7.5rs	2						
TOTAL								

Total is the sum of each column separately

Job

Job Times

Formation Name	Formation Depth (MD)	Top	Bottom	Date	Time	Time Zone
Form Type	Job depth MD	6014. ft	Job Depth TVD	5975. ft	Job Started	11 - Jun - 2011 08:03
Water Depth	Perforation Depth (MD)	From	To	Job Completed	11 - Jun - 2011 09:14	CST
				Departed Loc	11 - Jun - 2011 11:00	CST

Well Data

Description	New / Used	Max pressure psig	Size in	ID in	Weight lbm/ft	Thread	Grade	Top MD ft	Bottom MD ft	Top TVD ft	Bottom TVD ft
Production Open Hole				7.875					5975.		
Production Casing	Unknown		4.5	4.	11.6				5975.		
Surface	Unknown		8.625	8.097	24.				1500.		

Sales/Rental/3rd Party (HES)

Description	Qty	Qty uom	Depth	Supplier
KIT, HALL WELD-A	1	EA		
CLAMP - LIMIT - 4-1/2 - HINGED -	1	EA		
SHOE, FLT, 4-1/2 8RD, 2-3/4 SSII	1	EA		
CLR, FLT, 4-1/2 8RD, 9.5-13.5PPF, 2-3/4	1	EA		
CENTRALIZER ASSY - API - 4-1/2 CSG X	12	EA		

Tools and Accessories

Type	Size	Qty	Make	Depth	Type	Size	Qty	Make	Depth	Type	Size	Qty	Make
Guide Shoe					Packer					Top Plug			
Float Shoe					Bridge Plug					Bottom Plug			
Float Collar					Retainer					SSR plug set			
Insert Float										Plug Container			
Stage Tool										Centralizers			

Miscellaneous Materials

Gelling Agt		Conc		Surfactant		Conc		Acid Type		Qty		Conc	%
Treatment Fld		Conc		Inhibitor		Conc		Sand Type		Size		Qty	
Fluid Data													
Stage/Plug #: 1													
Fluid #	Stage Type	Fluid Name			Qty	Qty uom	Mixing Density lbm/gal	Yield ft3/sk	Mix Fluid Gal/sk	Rate bbl/min	Total Mix Fluid Gal/sk		
1	WBM Nitrified @ 250 scf/bbl				60.00	bbbl	.	.0	.0	.0			
2	Fresh Water				10.00	bbbl	8.33	.0	.0	.0			
3	MUD FLUSH III	MUD FLUSH III - SBM (528788)			10.00	bbbl	8.4	.0	.0	.0			
4	Fresh Water				5.00	bbbl	8.33	.0	.0	.0			
5	Premium	CMT - PREMIUM CEMENT (100003687)			200.0	sacks	14.8	1.56	7.42		7.42		
	94 lbm	CMT - PREMIUM - CLASS H REG OR TYPE V, BULK (100003687)											
	10 lbm	CAL-SEAL 60, 50 LB BAG (101217146)											
	10 %	SALT 10% (100003652)											
	0.7 %	HALAD(R)-322, 50 LB (100003646)											
	7.418 Gal	FRESH WATER											
6	2 % KCL Displacement				92.00	bbbl	8.33	.0	.0	.0			
	2.5 gal/Mgal	CLAYFIX 3, 5 GAL PAIL (101810105)											
Calculated Values				Pressures				Volumes					
Displacement	92.5	Shut In: Instant				Lost Returns	0	Cement Slurry		55.5	Pad		
Top Of Cement	4609	5 Min				Cement Returns	0	Actual Displacement		92.5	Treatment		
Frac Gradient		15 Min				Spacers	25	Load and Breakdown			Total Job		
Rates													
Circulating	5	Mixing		5	Displacement		6	Avg. Job		5			
Cement Left In Pipe	Amount	0 ft	Reason	Shoe Joint									
Frac Ring # 1 @	ID	Frac ring # 2 @	ID	Frac Ring # 3 @	ID	Frac Ring # 4 @	ID						
The Information Stated Herein Is Correct				Customer Representative Signature									

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/>

Mark Sievers, Chairman
Ward Loyd, Commissioner
Thomas E. Wright, Commissioner

Sam Brownback, Governor

October 17, 2011

Dee Jansen
Strat Land Exploration Co
15 E. 5th St., Ste 2020
Tulsa, OK 74103

Re: ACO1
API 15-025-21524-00-00
Snake Creek Ranch 1-10
SE/4 Sec.10-35S-21W
Clark 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,
Dee Jansen

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/>

Mark Sievers, Chairman
Ward Loyd, Commissioner
Thomas E. Wright, Commissioner

Sam Brownback, Governor

October 18, 2011

Dee Jansen
Strat Land Exploration Co
15 E. 5th St., Ste 2020
Tulsa, OK 74103

Re: ACO-1
API 15-025-21524-00-00
Snake Creek Ranch 1-10
SE/4 Sec.10-35S-21W
Clark County, Kansas

Dear Dee Jansen:

K.A.R. 82-3-107 provides for all completion information to be filed within 120 days of the spud date. Subsection(e)(2) of that regulation states "All rights to confidentiality shall be lost if the filings are not timely."

The above referenced well was spudded on 06/1/2011 and the ACO-1 was received on October 17, 2011 (not within the 120 days timely requirement).

Therefore, your request for confidential treatment of data contained within the ACO-1 filing cannot be granted at this time.

If you should have any questions, please do not hesitate to contact me at (316)337-6200.

Sincerely,

Production Department