J.K

Operator: License # 33152

## Kansas Corporation Commission Oil & Gas Conservation Division

Form ACO-1 September 1999 Form Must Be Typed

## WELL COMPLETION FORM WELL HISTORY - DESCRIPTION OF WELL & LEASE

API No. 15 - 125-30273

| Operator. License #   | 7,110,10   |
|---|--|
| Name: Shawnee Oil & Gas, LLC  | County: Montgomery   |
| Address: 106 West 14th Street, 7th Floor 5W                                   | NW SE -NW Sec. 11 Twp. 32 S. R. 16 ☑ East ☐ Wes  |
| City/State/Zip: Kansas City, MO 64105   | 1893 feet from S / (N) (circle one) Line of Section  |
| Purchaser:  | 1937 feet from E / (circle one) Line of Section  |
| Operator Contact Person: Jeff Mohajir   | Footages Calculated from Nearest Outside Section Corner:   |
| Phone: (816) 474-7777   | (circle one) NE SE NW SW   |
| Contractor: Name: Layne Christensen Canada, Ltd.                              | Lease Name: Romans Well #: 6-11  |
| License: 32999  | Field Name: Brewster   |
| Wellsite Geologist: Jim Stegeman  | Producing Formation: Cherokee Coals  |
| Designate Type of Completion:   | Elevation: Ground: 909 Kelly Bushing: 912  |
| New Well Re-Entry Workover  | Total Depth: 1230 Plug Back Total Depth: 1209  |
| OilSWDSIOWTemp. Abd.  | Amount of Surface Pipe Set and Cemented at 42 Fee  |
| Gas ENHR SIGW RECEIVED Dry Other (Core, WSW, Expl., Cathodic, etc)            | Multiple Stage Cementing Collar Used? Yes No. MISSION If yes, show depth set Fee   |
| If Workover/Re-entry: Old Well Info as follows: AUG 1 3 2003                  |  |
|   | Surface 170  |
| Well Name: WICHITA, KS  | VI   |
| Original Comp. Date:Original Total Depth:                                     | Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)   |
| Deepening Re-perf Conv. to Enhr./SWD  | Chloride content N/A ppm Fluid volume bbls   |
| Plug BackPlug Back Total Depth  | Dewatering method used N/A - Air Drilled   |
| Commingled Docket No  |  |
| Dual Completion Docket No   | Location of fluid disposal if hauled offsite:  |
| Other (SWD or Enhr.?) Docket No   | Operator Name:   |
|   | Lease Name: License No.:   |
| April 16, 2003 April 18, 2003 Spud Date or Date Reached TD Completion Date or | Quarter Sec Twp S. R   |
| Recompletion Date  Recompletion Date  Recompletion Date                       | County: Docket No.:  |
|   |  |
|   | and geologist well report shall be attached with this form. ALL CEMENTING . Submit CP-111 form with all temporarily abandoned wells. |
| Signature 4   | KCC Office Use ONLY  |
| Title: Agent Date 8-12-0  | Letter of Confidentiality Attached   |
| Subscribet and sworn to before me this \$12 day of August                     | If Denied, Yes Date:   |
| 7   | Wireline Log Received  |
| 20 03. There Leat   | Geologist Report Received  |
| Notary Public: SHERRY K. WATSON   | UIC Distribution   |
| Date Commission Expires: Notary Public - Notary State OF MISSOURI             | ,  |