

5/10/08

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

CONFIDENTIAL

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 5316
Name: FALCON EXPLORATION INC.
Address: 125 N. MARKET, SUITE 1252
City/State/Zip: WICHITA KS 67202
Purchaser: _____
Operator Contact Person: RON SCHRAEDER
Phone: (316) 262-1378
Contractor: Name: VAL ENERGY INC.
License: 5822
Wellsite Geologist: TED JOCHEMS JR

API No. 15 - 063-21646-0000
County: GOVE
SW SE SE SE Sec. 22 Twp. 13 S. R. 30 East West
420' feet from (S) N (circle one) Line of Section
530' feet from (E) W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: BROOKOVER Well #: 7
Field Name: GOVE NW

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SIOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc).

Producing Formation: _____
Elevation: Ground: 2875' Kelly Bushing: 2880'
Total Depth: 4700' Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 245' Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set 2253 Feet
If Alternate II completion, cement circulated from 2253
feet depth to SURFACE w/ 450 sx cmt.

If Workover/Re-entry: Old Well Info as follows:
Operator: _____
Well Name: _____
Original Comp. Date: _____ Original Total Depth: _____
 Deepening Re-perf. Conv. to Enhr./SWD
 Plug Back _____ Plug Back Total Depth _____
 Commingled _____ Docket No. _____
 Dual Completion _____ Docket No. _____
 Other (SWD or Enhr.?) _____ Docket No. _____

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 No.: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
County: _____ Docket No.: _____

1/24/07 2/5/07
Spud Date or 2/5/07
Recompletion Date 2/5/07 Date Reached TD 2/5/07 Completion Date or 2/5/07
Recompletion Date

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form (see rule 82-3-107 for confidentiality in excess of 12 months). One copy of all wireline logs and geologist well report shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

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.

Signature: Rosann M Schippers
Title: ENGINEER Date: 5/10/07

Subscribed and sworn to before me this 10th day of May, 2007.

Notary Public: Rosann M Schippers
Date Commission Expires: 9/28/07

ROSANN M. SCHIPPERS
NOTARY PUBLIC
STATE OF KANSAS
My Appt. Exp. 9/28/07

KCC Office Use ONLY
 Letter of Confidentiality Received
 If Denied, Yes Date: _____
 Wireline Log Received **RECEIVED**
 Geologist Report Received **KANSAS CORPORATION COMMISSION**
 UIC Distribution
MAY 10 2007

CONSERVATION DIVISION
WICHITA, KS