

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

Operator: License # 3882
Name: SAMUEL GARY JR. & ASSOCIATES, INC.
Address: 1560 BROADWAY, SUITE 2100
City/State/Zip: DENVER, CO 80202-4838
Purchaser: _____
Operator Contact Person: TOM FERTAL
Phone: (303) 831-4673
Contractor Name: SUMMIT DRILLING
License: 30141
Wellsite Geologist: JUSTIN CARTER

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

Plug Back Plug Back Total Depth

Commingled Docket No. _____

Dual Completion Docket No. _____

Other (SWD or Enhr.?) Docket No. _____

<u>9/14/2007</u>	<u>9/24/2007</u>	<u>DELAYED</u>
Spud Date or	Date Reached TD	COMPLETION
Recompletion Date		Completion Date or
		Recompletion Date

API No. 15 - 15-159-22536-0000

County: RICE

NW NE NE Sec. 3 Twp. 19 S. R. 10 East West

330 feet from NORTH Line of Section

1010 feet from EAST Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW

Lease Name: HABIGER ET AL Well #: 1-3

Field Name: WILDCAT

Producing Formation: _____

Elevation: Ground: 1725' Kelly Bushing: 1735'

Total Depth: 3388' Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at 332' Feet

Multiple State 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 No.: _____

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

County: _____ Docket No.: _____

INSTRUCTIONS: An original and two copies of this information shall be filed with the Kansas Corporation Commission, 130 South 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 on 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.

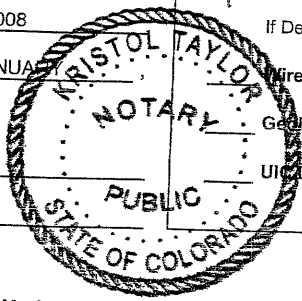
Signature: Thomas Fertal

Title: SR. GEOLOGIST Date: 01/09/2008

Subscribed and sworn to before me this 9 TH day of JANUARY

2008
Notary Public: Mustafa Bepari

Date Commission Expires: _____



KCC Office Use ONLY

Letter of Confidentiality Attached

If Denied, Yes Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

RECEIVED
KANSAS CORPORATION COMMISSION
JAN 10 2008

My Commission Expires 5/05/2008

CONSERVATION DIVISION
WICHITA, KS