

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

6/02/10

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

*KCC
me
6/2/08*

Operator: License # 31938
Name: Indian Oil Co., Inc.
Address: PO Box 209
City/State/Zip: Medicine Lodge, KS 67104
Purchaser: Oneok
Operator Contact Person: Anthony Farrar
Phone: (620) 886-3763
Contractor: Name: Warren Drilling
License: 33724
Wellsite Geologist: Josh Austin

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JUN 02 2008

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

KCC

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. _____

2/8/08 2/26/08 PENDING SWD App.
Spud Date or Not yet completed
Recompletion Date Date Reached TD Completion Date or
Recompletion Date

API No. 15 - 057-20597-00-00
County: Ford
NW SE NW SE Sec. 13 Twp. 27 S. R. 22 East West
1678 feet from S N (circle one) Line of Section
1678 feet from E W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW

Lease Name: Ford Well #: 3-13

Field Name: Konda Southeast

Producing Formation: Mississippian

Elevation: Ground: 2401 Kelly Bushing: 2409

Total Depth: 5850 Plug Back Total Depth: 5833

Amount of Surface Pipe Set and Cemented at 819 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 Allow to evaporate, no free water to haul.

Location of fluid disposal if hauled offsite: _____

Operator Name: None

Lease Name: _____ License No.: _____

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

County: _____ Docket No.: _____

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: _____

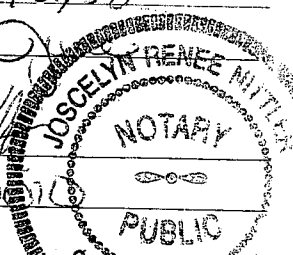
Title: V.P. Operations Date: 6/2/08

Subscribed and sworn to before me this 2 day of _____

20 08

Notary Public: _____

Date Commission Expires: July 10, 2010



KCC Office Use ONLY

Letter of Confidentiality Received

If Denied, Yes Date: _____

Wireline Log Received

Geologist Report Received **RECEIVED**

UIC Distribution **KANSAS CORPORATION COMMISSION**

JUN 03 2008