

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

9/10/10

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 5003
Name: McCoy Petroleum Corporation
Address: 8080 E. Central, Suite #300,
City/State/Zip: Wichita, KS 67212-3240
Purchaser: Oil: CVR Energy Gas: Atlas Pipeline MidCont.
Operator Contact Person: Scott Hampel
Phone: 316-636-2737 x 104
Contractor: Name: Val Energy, Inc.
License: 5822
Wellsite Geologist: Robert Hendrix / Brent Reinhardt

API No.: 15-191-22530-0000
County: Sumner County, KS
NE SW SE Sec 32 Twp 31 S. Rng 3 East West
990 feet from N S (check one) Line of Section
1650 feet from E W (check one) Line of Section

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

Footages Calculated from Nearest Outside Section Corner:
(check one) NE SE NW SW
Lease Name: ERSKINE Well #: #3-32
Field Name: Erskine North
Producing Formation: Mississippian
Elevation: Ground: 1253' Kelly Bushing: 1263'
Total Depth: 4055' Plug Back Total Depth: 4013'
Amount of Surface Pipe Set and Cemented at 280' 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 cmf.

If Workover/Re-entry: Old Well Info as follows: **CONFIDENTIAL**
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. _____
_____ 6/6/08 _____ 6/14/08 _____ 8/6/08
Spud Date or _____ Date Reached TD _____ Completion Date or
Recompletion Date _____ Recompletion Date _____

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content 5,800 ppm Fluid volume 1500 bbls
Dewatering method used Evaporation
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 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: Scott Hampel
Scott Hampel
Title: Vice President - Production Date: 9/10/08

Subscribed and sworn to before me this 10th day of September
2008
BRENT B. REINHARDT
Notary Public - State of Kansas
My Appt. Expires 12/7/2011
Date Commission Expires: 12/7/2011

KCC Office Use ONLY
 Letter of Confidentiality Attached
If Denied, Yes Date - _____
 Wireline Log Received
 Geologist Report Received
UIC Distribution
RECEIVED
KANSAS CORPORATION COMMISSION
SEP 12 2008