

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

9/10/10

Operator: License # 32211
 Name: O'Brien Energy Resources Corp.
 Address: 18 Congress Street, Suite 207
 City/State/Zip: Portsmouth, NH 03801
 Purchaser: _____
 Operator Contact Person: Joseph Forma
 Phone: (603) 427-2099
 Contractor: Name: Duke Drilling Co. Inc.
 License: 5929
 Wellsite Geologist: Peter Debenham
 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. _____
 Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date
8-30-2008 8-10-2008 8-16-2008

API No. 15 - 119-21211-00-00
 County: Meade
SE SE SW Sec. 34 Twp. 32 S. R. 29 East West
610' feet from S N (circle one) Line of Section
2970' feet from E W (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE NW SW
 Lease Name: BORCHERS Well #: 2-34
 Field Name: UNNAMED
 Producing Formation: MORROW SANDSTONE
 Elevation: Ground: 2650' Kelly Bushing: 2662'
 Total Depth: 6200 Plug Back Total Depth: _____
 Amount of Surface Pipe Set and Cemented at 1579' 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 3500 ppm Fluid volume 3 bbls
 Dewatering method used HAUL FREE WATER, NATURAL EVAP. COVER W/ 36 INCH MINIMUM
 Location of fluid disposal if hauled offsite: _____
 Operator Name: DRILL CO. FLUID SERVICE
 Lease Name: FELDMAN License No.: 9491
 Quarter _____ Sec. 18 Twp. 34 S. R. 28 East West
 County: MEADE Docket No.: C-23094

*in Debenham's
 report or
 10/13/08
 7/30/08
 W
 M*

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: PRESIDENT Date: 9/10/2008
 Subscribed and sworn to before me this 12 day of September
20 08
 Notary Public: Patricia A. O'Brien
PATRICIA A. O'BRIEN
 Notary Public - New Hampshire
 Date Commission Expires: _____
 My Commission Expires May 18, 2010

KCC Office Use ONLY

Letter of Confidentiality Received
 If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

RECEIVED
 KANSAS CORPORATION COMMISSION
SEP 17 2008