

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

Call me 10/14/08

9/09/10

Operator: License # 5003
Name: McCoy Petroleum Corporation
Address: 8080 E. Central, Suite #300,
City/State/Zip: Wichita, KS 67212-3240 **KCC**
Purchaser: None **SEP 09 2008**
Operator Contact Person: Scott Hampel **CONFIDENTIAL**
Phone: 316-636-2737 x 104
Contractor: Name: Sterling Drilling Company
License: 5142
Wellsite Geologist: Tim Priest

API No.: 15-047-21579-0000
County: Edwards

C SE SE Sec 17 Twp 26 S. Rng 17 East West
660 feet from N S (check one) Line of Section
660 feet from E W (check one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(check one) NE SE NW SW
Lease Name: BUCHANAN TRUST "B" Well #: #1-17

Field Name: Fellsburg South
Producing Formation: None

Elevation: Ground: 2133' Kelly Bushing: 2146'
Total Depth: 4615' Plug Back Total Depth: None

Amount of Surface Pipe Set and Cemented at 312' 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.

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 **CONFIDENTIAL**
Operator: _____ **SEP 09 2008**
Well Name: _____

Original Comp. Date: _____ Original Total Depth: **KCC** _____
_____ 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. _____
_____ 8/27/08 _____ 9/5/08 _____ 9/5/08
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 29,000 ppm Fluid volume 1200 bbls

Dewatering method used Hauling and Evaporation
Location of fluid disposal if hauled offsite: _____

Operator Name: Roberts Resources, Inc.
Lease Name: MARY #1-16 SWDW License No.: 32781
Quarter NE Sec. 16 Twp. 29 S. R. 18 East West
County: Kiowa Docket No.: D-28396

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: 9/9/08

Subscribed and sworn to before me this 9th day of September

2008 **BRENT B. REINHARDT**
Notary Public - State of Kansas
My Appt. Expires 12/7/2011 Brent B. Reinhardt

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