Kansas Corporation Commission Oil & Gas Conservation Division

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGI	NAL FORM ACCO-1
my dob	September 1999 Form Must Be Typed
1(0/32/	10/23/00

Api No. 15 - 125-31387-00-00 Amended County: Montgomery	Feet No Feet sx cmt.
Address: 1900 Shawnee Mission Parkway City/State/Zip: Mission Woods, KS 66205 Purchaser: Operator Contact Person: Timothy H. Wright Phone: (913	Feet No Feet sx cmt.
1980 feet from S / (circle one) Line of Set	Feet No Feet sx cmt.
Purchaser: Operator Contact Person: Timothy H. Wright Phone: (913) 748-3960 Contractor: Name: McPherson Drilling License: 5675 Wellsite Geologist: Designate Type of Completion: Well Mare: 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: Despening Re-perf. Conv. to Enhr./SWD Plug Back Plug Back Total Depth: Dewatering method used N/A - Air Drilled Location of fluid disposal if hauled offsite: 1980 feet from (E) W (circle one) Line of Se Footages Calculated from Nearest Outside Section Corner: (circle one) NE SE NW SW Lease Name: Fowler Well Name: Cherokee Basin Coal Area Producing Formation: Cherokee Coals Elevation: Ground: 831' Total Depth: 1490' Plug Back Total Depth: Multiple Stage Cementing Collar Used? If yes, show depth set If Alternate II completion, cement circulated from 1484 feet depth to Surface w/ 155 Chloride content (Data must be collected from the Reserve Pit) Chloride content Dewatering method used N/A - Air Drilled Location of fluid disposal if hauled offsite:	Feet No Feet sx cmt.
Operator Contact Person: Timothy H. Wright Phone: (_913) 748-3960 Contractor: Name: McPherson Drilling License: 5675 Wellsite Geologist: Designate Type of Completion: V New Well Re-Entry Workover Oil SWD SIOW Temp. Abd. V Gas ENHR SIGW Dry Other (Core, WSW, Expl., Cathodic, etc) If Workover/Re-entry: Old Well Info as follows: Original Comp. Date: Deepening Re-perf. Conv. to Enhr./SWD Plug Back Plug Back Total Depth Commingled Docket No. Dual Completion Docket No. Original Completion Docket No. Original Completion Docket No. Dual Completion Docket No. If workover (Pae-and the provided of the provided disposal if hauled offsite: Operator (Circle one) Well SE NW SW Well SE NW SW Well #: 7-19 Flootages Calculated from Nearest Outside Section Corner: (circle one) Well SE NW SW Well SE NW SW Well #: 7-19 Flootages Calculated from Nearest Outside Section Corner: (circle one) Well SE NW SW Well SE NW SW Lease Name: Cherokee Basin Coal Area Producing Formation: Cherokee Coals Elevation: Ground: 831' Kelly Bushing: Total Depth: 1490' Plug Back	FeetNoFeetsx cmt.
Phone: (913) 748-3960 Contractor: Name: McPherson Drilling License: 5675 Wellsite Geologist:	FeetNoFeetsx cmt.
Contractor: Name: McPherson Drilling License: 5675 Wellsite Geologist: Producing Formation: Cherokee Basin Coal Area Producing Formation: Cherokee Coals Basin Coal Area Producing Formation: Cherokee Coals Elevation: Ground: 831' Kelly Bushing: Total Depth: 1484' Amount of Surface Pipe Set and Cemented at 44 Amount of Surface Pipe Set and Cemented at 44 Multiple Stage Cementing Collar Used? Yes If yes, show depth set If Alternate II completion, cement circulated from 1484 feet depth to Surface ye, 155 Well Name: Original Comp. Date: Original Total Depth: (Data must be collected from the Reserve Pit) Deepening Re-perf. Conv. to Enhr./SWD Plug Back Plug Back Total Depth Commingled Docket No. Dual Completion Docket No. Oncombox Name: Cherokee Basin Coal Area Producing Formation: Cherokee Coals Elevation: Ground: 831' Kelly Bushing: Total Depth: 1490' Plug Back Total Depth: 1484' Amount of Surface Pipe Set and Cemented at 44 Multiple Stage Cementing Collar Used? Yes If yes, show depth set If Alternate II completion, cement circulated from 1484 feet depth to Surface yes Original Comp. Date: Original Total Depth: (Data must be collected from the Reserve Pit) Chloride content N/A ppm Fluid volume Dewatering method used N/A - Air Drilled Location of fluid disposal if hauled offsite:	FeetNoFeetsx cmt.
License: 5675 Wellsite Geologist:	FeetNoFeetsx cmt.
License: 5675 Wellsite Geologist:	FeetNoFeetsx 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: Operator: Well Name: Original Comp. Date: Deepening Re-perf. Deepening Re-perf. Conv. to Enhr./SWD Plug Back Total Depth: Dewatering method used N/A - Air Drilled Location of fluid disposal if hauled offsite: Descretor Name: Deceptor Name: Operator Name: Dual Completion Docket No. Dual Completion Re-perf. Deceptor Name: Deceptor Name: Conv. to Enhr./SWD Deceptor Name: Decept	Feet Feet sx cmt.
New Well Re-Entry Workover	Feet Feet sx cmt.
OiiSIOWTemp. Abd	Feet No Feet sx cmt.
Multiple Stage Cementing Collar Used? ☐Yes ☐ Dry ☐ Other (Core, WSW, Expl., Cathodic, etc) ☐ If yes, show depth set ☐ ☐ If Workover/Re-entry: Old Well Info as follows: ☐ If Alternate II completion, cement circulated from 1484 ☐ Get depth to ☐ Surface ☐ W/ 155 ☐ ☐ Well Name: ☐ Original Comp. Date: ☐ Original Total Depth: ☐ Conv. to Enhr./SWD ☐ Conv. to Enhr./SWD ☐ Chloride content ☐ N/A ☐ ppm Fluid volume ☐ Dewatering method used ☐ N/A - Air Drilled ☐ Docket No. ☐ Dual Completion ☐ Docket No. ☐ Operator Name: ☐	Feet sx cmt.
Dry Other (Core, WSW, Expl., Cathodic, etc)	Feet
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Operator:	
Well Name:Original Comp. Date:Original Total Depth:(Data must be collected from the Reserve Pit) Deepening	
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Deepening Re-perf. Conv. to Enhr./SWD Plug Back Plug Back Total Depth Commingled Docket No. Dual Completion Docket No. Docket No. Chloride content N/A ppm Fluid volume Dewatering method used N/A - Air Drilled Location of fluid disposal if hauled offsite:	bbls
Plug Back Plug Back Total Depth Commingled Docket No. Dual Completion Docket No. Operator Name:	bbis
Commingled Docket No. Dual Completion Docket No. Docket No. Docket No. Commingled Location of fluid disposal if hauled offsite:	
Dual Completion Docket No Location of fluid disposal if hauled offsite:	
Operator Name:	
Lease Name: License No.:	
6/28/2007 7/9/2007 8/10/2007 Spud Date or Date Reached TD Completion Date or Quarter Sec TwpS. R East] West
Recompletion Date Recompletion Date 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, Wic 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 at 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 8 107 for confidentiality in excess of 12 months). One copy of all wireline logs and geologist well report shall be attached with this form. ALL CEMENT TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.	pply. 32-3-
All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the state herein are complete and correct to the best of my knowledge.	ments
Signature: KCC Office Use ONLY	
Title: Agent Date: 16-28-09 Letter of Confidentiality Attached	
Subscribed and sworn to before me this 28 day of Lotober , If Denied, Yes Date:	
Wireline Log Received	
Man Thursday Corporatio	
Notary Public: MacLAUGHLIN DARLING VIC Distribution	
Date Commission Expires: 1-4-2009 Notary Public - State of Kansas OCT 2 9	മത്തെക്ക