

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

10/27/10

Operator: License # 5003

Name: McCoy Petroleum Corporation

Address: 8080 E. Central, Suite #300,

City/State/Zip: Wichita, KS 67212-3240 **RECEIVED**
KANSAS CORPORATION COMMISSION

Purchaser: None **OCT 28 2008**

Operator Contact Person: Scott Hampel

Phone: 316-636-2737 x 104 **CONSERVATION DIVISION**
WICHITA, KS

Contractor: Name: Murfin Drilling Company, Inc.

License: 30606

Wellsite Geologist: Jeff Christian **CONFIDENTIAL**

API No.: 15-039-21074-0000

County: Decatur

SE SE NE Sec 26 Twp 5 S. Rng 29 East West

2970 feet from N S (check one) Line of Section

330 feet from E W (check one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(check one) NE SE NW SW

Lease Name: ALBERS "A" Well #: #2-26

Field Name: Wildcat

Producing Formation: None

Elevation: Ground: 2784' Kelly Bushing: 2789'

Total Depth: 4210' Plug Back Total Depth: None

Amount of Surface Pipe Set and Cemented at 220 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: **OCT 27 2008**

- 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. _____

10/8/08 10/15/08 10/15/08

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 19,000 ppm Fluid volume 1200 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: 10/27/08

Subscribed and sworn to before me this 27th day of October

2008 **BRENT B. REINHARDT**
Notary Public - State of Kansas

Notary Public: Brent B. Reinhardt
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