

CONFIDENTIAL

ORIGINAL

10/27/09

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed.

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

* AMENDED

Operator: License # 32811
Name: Osage Resources, LLC
Address: 6209 N. Hwy. K61
City/State/Zip: Hutchinson, KS 67502
Purchaser: OneOK
Operator Contact Person: Benjamin W. Crouch
Phone: (620) 664-9622
Contractor: Name: Vision Oil & Gas Service
License: 34190

API No. 15 - 007-20809-00-01
County: Barber
SE NW SW NW Sec. 12 Twp. 33 S. R. 15 East West
1790 feet from (circle one) N (circle one) Line of Section
470 feet from (circle one) W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Osage No. Well #: 142 SWD
Field Name: Aetna Gas Field
Producing Formation: Mississippian
Elevation: Ground: 1871 Kelly Bushing: 1879
Total Depth: 5720 Plug Back Total Depth: 5294
Amount of Surface Pipe Set and Cemented at 118' Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from na
feet depth to 3000 w/ 425 _____ sx cmt.

Wellsite Geologist: _____
Designate Type of Completion: **CONFIDENTIAL**
____ New Well Re-Entry Workover
____ Oil SWD STOW Temp. Abd.
____ Gas ENHR SIGW
____ Dry Other (Core, WSW, Expi., Cathodic, etc)

If Workover/Re-entry: Old Well Info as follows:
Operator: National Oil Company
Well Name: Velma 1

Original Comp. Date: 01/23/1980 Original Total Depth: 4900
____ 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. _____

09/12/2008 9/22/2008 9/23/2008
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: _____ ppm Fluid volume: _____ bbls
Dewatering method used: _____
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: [Signature]
Title: Vice President Date: 10/27/2008
Subscribed and sworn to before me this 27th day of October
20 08
Notary Public: [Signature]
Date Commission Expires: _____

NOTARY PUBLIC - State of Kansas
SHAINA CLARK
My Appt. Exp. [Signature]

KCC Office Use ONLY
____ Letter of Confidentiality Received
If Denied, Yes Date: _____
____ Wireline Log Received
____ Geologist Report Received
____ UIC Distribution

RECEIVED
KANSAS CORPORATION COMMISSION

DEC 03 2008

CONSERVATION DIVISION
WICHITA, KS