Operator: License # 5316

Name: FALCON EXPLORATION, INC. Address 125 N. MARKET, SUITE 1252

Purchaser: NCRA/LOST RIVER RESOURCES INC.

City/State/Zip: WICHITA, KS 67202

Phone: (316) 262-1378

Designate Type of Completion:

License: 5822

Operator Contact Person: MIKE MITCHELL

Contractor: Name: VAL ENERGY INC.

Wellsite Geologist: WESLEY D HANSEN

CORRECTED

KANSAS CCRPORATION COMMISSION

OIL & GAS CONSERVATION DIVISION

WELL

PIGINAL

Form ACO-1 September 1999 Form Must Be Typed

AMENTAL

WELL HISTORY - DESCRIPTION OF WELL & LEASE

	100 0100
	API No. 15 - 025-21403-0000 5 21
	County: CLARK
	SW_NE_SE_SW_Sec. 2 Twp. 31 S. R. 22 East Wes
	720
	teet from (S)/ N (circle one) Line of Section
	2100 feet from E /(W) (circle one) Line of Section
	Footages Calculated from Nearest Outside Section Corner:
	(circle one) NE SE NW SW
9	Lease Name: GRC Well #: #1-2(SW)
:	Field Name: LIBERTY RIVER
þ	Producing Formation: MORROW
	Elevation: Ground: 2174 Kelly Bushing: 2184
	Total Depth: 5400 Plug Back Total Depth: 5275
	Amount of Surface Pipe Set and Cemented at 692 Fee
	Multiple Stage Cementing Collar Used? ☐ Yes ☑ N
	If yes, show depth setFe
	If Alternate II completion, cement circulated from
	feet depth tow/sx cm
	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)
	Chloride content 9800 ppm Fluid volume 125 bbl
	Dewatering method used HAULED OFF
	Location of fluid disposal if hauled offsite:
	Operator Name: KBW OIL
	Lease Name: HARMON License No.: 5993
	Quarter Sec. 11 Twp. 33 S. R. 20 East Wee
	County: COMANCHE Docket No.: D-22304

_____ Re-Entry __ Workover ___ SIOW _ Other (Core, WSW, Expl., Cathodic, etc) If Workover/Re-entry: Old Well Info as follows: Operator -Well Name: _ _____Original Total Depth:__ Original Comp. Date: ____ __ 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. 2/17/07 3/1/07 4/30/07 Spud Date or Date Reached TD Completion Date or Recompletion Date Recompletion Date INSTRUCTIONS: An original and two copies of this form shall be filed wi 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:_ KCC Office Use ONLY Title: PRESIDENT 11/20/08 Letter of Confidentiality Received Subscribed and sworn to before me this 20th day of NOVEMBER If Denied, Yes Date:__ Wireline Log Received 20_08 **Geologist Report Received**

UIC Distribution 9/28/11 Date Commission Expires:

