

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL AND GAS DIVISION

ORIGINAL

Form ACO-1
October 2008
Form Must Be Typed

2/02/11

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 5135
 Name: Farmer, John O., Inc.
 Address 1: 370 W Wichita Ave
 Address 2: PO Box 352
 City: Russell State: KS Zip: 67665 + 2 3 5
 Contact Person: Marge Schulte
 Phone: (785) 483-3145, Ext. 214
 CONTRACTOR: License # 33575 **CONFIDENTIAL**
 Name: WW Drilling, LLC FEB 02 2009
 Wellsite Geologist: Steve Murphy
 Purchaser: None **KCC**
 Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SIOW
 Gas ENHR SIGW
 CM (Coal Bed Methane) Temp. Abd.
 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. Conv. to SWD
 Plug Back: _____ Plug Back Total Depth _____
 Commingled Docket No.: _____
 Dual Completion Docket No.: _____
 Other (SWD or Enhr.?) Docket No.: _____
11/28/08 12/3/08
 Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 065-23512-00-00
 Spot Description: _____
SE SE SE SW Sec. 27 Twp. 9 S. R. 22 East West
128 Feet from North / South Line of Section
2570 Feet from East / West Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
 County: Graham
 Lease Name: F & A Unit Well #: 1
 Field Name: Wildcat
 Producing Formation: None
 Elevation: Ground: 2367' Kelly Bushing: 2372'
 Total Depth: 4027' Plug Back Total Depth: _____
 Amount of Surface Pipe Set and Cemented at: 217 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.

Drilling Fluid Management Plan
 (Data must be collected from the Reserve Pit)
 Chloride content: 17,000 ppm Fluid volume: 700 bbls
 Dewatering method used: Air dry, Backfill
 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: John O. Farmer IV
 Title: Vice-President Date: 2-2-09
 Subscribed and sworn to before me this 2nd day of February,
 20 09.
 Notary Public: Margaret A. Schulte
 Date Commission Expires: _____

KCC Office Use ONLY
 Letter of Confidentiality Received
 If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
 FEB 03 2009

1-27-13