| County MONTGOMERY ACO-1 WELL HISTORY DESCRIPTION FOR WELL AND LEASE Operator: License # 4172 Name: UCG STORAGE, INC. Address P.O. BOX 650205 City/State/Zip DALLAS, TX 75265-0205 Purchaser: NA Operator Contact Person: MATTHEW FRIHART Phone (972) 855-3098 Contractor: Name: MOKAT DRILLING License: MOKAT DRILLING License: MOKAT DRILLING Amount of Surface Pipe Set and Cemented at 22 Multiple Stage Cementing Collar Used? Yes XXXX Hew Well Re-Entry Morkover Lease Name Surface Pipe Set and Cemented at 22 Multiple Stage Cementing Collar Used? Yes XXXX Hew Well Re-Entry Morkover Lease Name Surface Pipe Set and Cemented at 22 Multiple Stage Cementing Collar Used? Yes XXXX If yes, show depth set If Alternate II completion, cement circulated from Entry Mell Received from the Reserve Pit) ARR SIGN STORAGE. Operator: Name: MOKAT DRILLING License: Mokat DRILLING Amount of Surface Pipe Set and Cemented at 22 Multiple Stage Cementing Collar Used? Yes XXXX If yes, show depth set If Alternate II completion, cement circulated from Feet depth to Mr. ART DRILLED Despending Re-perf. Conv. to Inj/SMD Plug Back Path Set Path Completion Docket No. Duerter Sec. Tup. S Reg. License Name License & A172 AXX | ne of Section Corner: | tion tion r: |
|--|--|--------------------------------------|
| DESCRIPTION OF WELL AND LEASE Operator: License # 4172 Name: UCG STORAGE, INC. Address P.O. BOX 650205 City/State/Zip DALLAS, TX 75265-0205 Purchaser: NA Operator Contact Person: MATTHEW FRIHART Operator Contact Person: MATTHEW FRIHART Contractor: Name: MOKAT DRILLING License: Wellsite Geologist: KENTON HUPP Designate Jype of Completion XX New Well Ref. SIGN Dry XXX Other (Core, WSW, Expl., Cathodic, etc) STORAGE If Norkover/Reentry: Old Well Info as follows: Comp. Date Octation Porton Report Name: Comp. Date Name Octation Part Name: Despening Re-perf. Conv. to Inj/SWD Plug Back Part Despening Re-perf. Conv. to Inj/SWD Part Commingled Docket No. Perform SAMX(circle one) Line of Section Section Corner: Section Corner: Section Section Corner: Name Sect A 18p, 241 Name Section Corner: Section Corner: Name Section Corner: Name Section Corner: Name Section Section Corner: Name Section Cor | ine of Section Corner: | tion tion r: |
| Name: UCG STORAGE, INC. Address P.O. BOX 650205 City/State/Zip DALLAS, TX 75265-0205 Purchaser: NA Operator Contact Person: MATTHEW FRIHART Phone (972) 855-3098 Contractor: Name: MOKAT DRILLING License: MoKAT DRILLING License: Welliste Geologist: KENTON HUPP Designate Jype of Completion XX New Well Re-Entry Morkover — Oil SLO STORAGE Dry XXX Other (Core, MSW, Expl., Cathodic, etc.) STORAGE If Morkover/Reentry: Oid Well Info as follows: Operator Completion Description Description Well Name: Desponing Re-perf. Conv. to Inj/SMD Plug Back Part Ind. Description Desc | ine of Section Corners | tion r: |
| Address P.O. BOX 650205 City/State/Zip DALLAS, TX 75265-0205 Purchaser: NA Operator Contact Person: MATTHEW FRIHART Phone (972) 855-3098 Contractor: Name: MOKAT DRILLING License: Mokat Dril | 2 | r: |
| City/State/Zip DALLAS, TX 75265-0205 Purchaser: NA Operator Contact Person: MATTHEW FRIHART Phone (972) 855-3098 Contractor: Name: MOKAT DRILLING License: MOKAT DRILLING Mellisite Geologist: KENTON HUPP Designate Type of Completion XX New Well Re-Entry Morkover Motion SIGN SIGN Temp. Abd. Gas ENNR SIGN Temp. Abd. Operator: Mokover/Reentry: Old Well Info as follows: Operator: Well Name: Desemble of Completion Temp. Action of fluid disposal if hauled offsite: Desembling Re-Perf. Conv. to Inj/SND Plug Back Pair Desemble of Completion Decket No. Despending Re-Perf. Conv. to Inj/SND Plug Back Pair Decket No. Despending Decket No. Lease Name SOUTH LIBERTY Well # 2 Lease Name SOUTH LIBERTY Well # 2 Liberty Field Name LIBERTY Producing Formation SQUIRREL Elevation: Ground 757 KB Total Depth 534 PBTD Amount of Surface Pipe Set and Cemented at 22 Multiple Stage Cementing Collar Used? Yes XXXX If yes, show depth set If Alternate II completion, cement circulated from feet depth to M/ SAM ACTION OF The Completion of Fluid disposal if hauled offsite: Desamble Scouth Liberty NE, SE, NM or SM (circle one) SQUIRREL Elevation: Ground 757 KB Multiple Stage Cementing Collar Used? Yes XXXX If yes, show depth set If Alternate II completion, cement circulated from M/ SAM Action of feet depth to M/ SAM Action of feet depth to M/ SAM Action of fluid disposal if hauled offsite: Dewatering method used NAM Action of fluid disposal if hauled offsite: AUG 03 2 Operator Name License Market No. Location of fluid disposal if hauled offsite: AUG 03 2 Depart Completion Decket No. | 2 | |
| City/State/Zip DALLAS, TX 75265-0205 Purchaser: NA Operator Contact Person: MATTHEW FRIHART Phone (972) 855-3098 Contractor: Name: MOKAT DRILLING License: MOKAT DRILLING License: Melisite Geologist: KENTON HUPP Designate Jype of Completion XX New Well Re-Entry Workover — 0il SND SIOW Temp. Abd. Gas ENHR SIOW STORAGE If Workover/Reentry: Old Well Info as follows: STORAGE If Workover/Reentry: Old Well Info as follows: Desarring method used Re-perf. Conv. to Inj/SND Plug Back PBTD Despening Re-perf. Conv. to Inj/SND PBTD Committee Docket No. Convert No. Conv. Name License Na | | |
| Purchaser: NA Phone (972) 855-3098 Contractor: Name: MOKAT DRILLING License: Mokat Drilling Mokat Drilling Stage Committing Collar Used? Yes XXXX If yes, show depth set License If Alternate II completion, coment circulated from feet depth to M/ ax Gas ENNR SIGN Dry XXX Other (Core, MSM, Expl., Cathodic, etc) STORAGE If Norkover/Reentry: Old Well Info as follows: Comp. Date Old Total Depth Devater No. Despening Re-perf. Conv. to Inj/SMD Plug Back Docket No. Decretor: Matthew FRIHART Elevation: Ground 757 KB Licenselion: Ground 757 KB | | |
| Operator Contact Person: MATTHEW FRIHART Phone (972) 855-3098 Contractor: Name: MOKAT DRILLING License: MOKAT DRILLING License: MOKAT DRILLING License: MOKAT DRILLING Amount of Surface Pipe Set and Cemented at 22 Multiple Stage Cementing Collar Used? Yes XXXX Multiple Stage Cementing Collar Used? Yes XXXX Multiple Stage Cementing Collar Used? Yes XXXX If yes, show depth set Oil SND SIOW Temp. Abd. feet depth to M/ SX Dry XXX Other (Core, MSW, Expl., Cathodic, etc) Operator: Department of Completion Contact Completion of Fluid Management Plan (Date must be collected from the Reserve Pit) AIR DRILLED Chloride content Department Contact Cont | | |
| Phone (972) 855-3098 Contractor: Name: MOKAT DRILLING License: MOKAT DRILLING License: Mokat Drilling Amount of Surface Pipe Set and Cemented at 22 Multiple Stage Cementing Collar Used? Yes XXXX Multiple Stage Cementing Collar Used? Yes XXXX If yes, show depth set | | |
| Contractor: Name: MOKAT DRILLING License: MoKAT DRILLING License: MoKAT DRILLING License: MoKAT DRILLING Amount of Surface Pipe Set and Cemented at | | |
| License: Multiple Stage Comenting Collar Used? Yes XXXX Yes | | |
| Designate Type of Completion | | |
| Designate Type of Completion XX New Well Re-Entry Workover Oil SND SIOW Temp. Abd. Gas ENHR SIGW Dry XXX Other (Core, WSW, Expl., Cathodic, etc) STORAGE If Workover/Reentry: Oid Well Info as follows: Operator: Well Name: Comp. Date Old Total Depth Despening Re-perf. Conv. to Inj/SMD Plug Back Docket No. Decket No. Decket No. If Alternate II completion, cement circulated from | | |
| New Well Re-Entry Workover | | |
| Dry XXX Other (Core, WSW, Expt., Cathodic, etc.) STORAGE | | |
| Dry XXX Other (Core, WSW, Expt., Cathodic, STORAGE STORAGE | AI + 7 - T | Dia 2 |
| If Workover/Reentry: Old Well Info as follows: Operator: Well Name: Comp. Date Old Total Depth Dewatering method used KANSAS CORPORATION Location of fluid disposal if hauled offsite: Deepening Re-perf. Operator Name Operator Name License (No. 100 No. | | 29.11 |
| Operator: Chloride contentppm Fluid volume RECEIVE Well Name: Old Total Depth Location of fluid disposal if hauled offsite: Deepening Re-perf Conv. to Inj/SMD | • | |
| Dewatering method used | lume | bbls |
| Comp. DateOld Total Depth Location of fluid disposal if hauled offsite: Deepening Re-perf Conv. to Inj/SMDOperator Name | RECE | EVED |
| Deepening Re-perf. Conv. to Inj/SMD Plug Back PBTD Commingled Docket No. Dual Completion Docket No. License Name License (\$\text{starty} \text{AUG 03 2}\) | | TION COMMIS |
| Plug Back PBTD Operator Name | | 3 2000 |
| Ovel Completion Docket No. Lease Name | | 0 2000 |
| Other (SMD or Inj?) Docket No. | Meiglan Vill | POLISIVIA NON |
| TIP S ENG. | WICHT | TA, KS |
| 5-4-2000 $5-16-2000$ | | |
| Spud Date | ···· | |
| INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Na - 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 on side two of this form will be held confidential for a peri 12 months if requested in writing and submitted with the form (see rule 82-3-107 for confidentiality in excess months). One copy of all wireline logs and geologist well report shall be attached with this form. ALL CEMENTING TICE NUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned we | ial for a p | period of cess of 12 G TICKETS |
| All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully co | | an merra. |
| with and the statements herein are complete and correct to the best of my knowledge. | y abandoned | |
| Signature Rousen Lespo F K.C.C. OFFICE USE ONLY Letter of Confidentiality Attache | y abandoned | |
| Title CONSULTING ENGINEER Date //- (1000) C Wireline Log Received C Geologist Report Received | y abandoned been fully ONLY tiality Att | ly complied |
| 1) de la | y abandoned been fully ONLY tiality Att | ly complied |
| Subscribed and sworn to before me this 2 day of | y abandoned been fully ONLY ciality Attived acceived | ly complied |

ALMA HUPP
Notary Public - State of Kansas
My Appt. Expires

Form ACO-1 (7-91)

| Estimated Producti Per 24 Hours Disposition of Gas: | | | RAGE | | Production Inte | rval | |
|---|----------------------------------|--|--------------------------------------|--|--|---------------------------------------|---|
| | | Bbls. Gas | Mcf Wat | er Bble | . Gas-0 | il Ratio | PLEALTA |
| Date of First, Res | NA · | | oducing Method | | | | Other (Explain) |
| TUBING RECORD | Size | Set At NA | Packer At | Liner Run | LJ Yes L | | |
| | | | | | | | |
| | | • | | | | | |
| OPEN HOLE | 469-534 | | | NAT | URAL | | |
| Shots Per Foot | PERFORATION Specify Foot | ON RECORD - Bridge P age of Each Interval | lugs Set/Type Perforated | (Amount a | Fracture, Shot nd Kind of Mate | rial Used) | Depth |
| Plug Off Zone | | <u> </u> | <u></u> | 1 | | Dament 1 | |
| Protect Casing Plug Back TD | ' | | | | | | |
| Perforate | Top Botton | n Type of Cement | #Sacks Used | | .,,,,, | | |
| urpose: | Depth | | | | Type and Perce | nt Additiv | 18 |
| | ADDITIONAL | CEMENTING/SQUEEZE RE | CORD | | <u> </u> | | <u> </u> |
| PRODUCTION | 7 7/8" | 5 1/2 | 15.5 | 469 | 011.0. | 1 | |
| SURFACE | 12 1/4" | 8 5/8 | 15.5 | 460 | CIRC. | | |
| rpose of String | Drilled | Set (In 0.D.) | Lbs./Ft. | Depth | Cement | Used | Additives |
| **** | Report a | Size Casing | Weight | Setting | Type of | # Sacks | Type and Percent |
| | A | CASING RECORD | New Us | ed termediate. | production, et | c. | · |
| | | CACING BECOON | | | | | |
| | GR1 | N | | .• | | | . • |
| | CDI | N | | • | | | |
| et All E.Logs Run: | CBI DII | | | | | | • |
| ectric Log Run (Submit Copy.) | | XX Yes No | | | | | |
| res Taken | | Yes X No | | | | | |
| ples Sent to Geolo | ogical Survey | ☐ _{Yes} ※ № | SQUIRRE | Ĺ | 475 | | |
| ll Stem Tests Take (Attach Additional | n Sheets.) | ☐ Yes 1 No | Name | | Top | | Datum |
| irostatic pressures, more space is need | bottom hole to | opy of log. | Log | | (Top), Depth a | | Sample |
| TRUCTIONS: Show i | important tops me tool open a | and base of formation d closed, flowing o | ons penetrated. and shut-in press | Detail all (ures, wheth | cores. Report er shut-in pred counters durin | all drill saure read wa test. A | stem tests giving hed static level, ttach extra sheet |
| | | West | | | | 44 4-241 | |
| . 4 Tup. <u>345</u> | X Sec. 17 | East | County MC | NTGOMERY | | | |
| rator Name <u>UCG S</u> | | | Lease Name _ | | | _ Well # _ | 2 |
| | | | SIDE TWO | | | | |

CONSOLIDATED INDUSTRIAL SERVICES, INC. 211 W. 14TH STREET, CHANUTE, KS 66720 316-431-9210 or 800-467-8676

ORIGINAL
TICKET NUMBER 10514
LOCATION B'Ulle
FOREMAN Hoold Park

TREATMENT REPORT

| DATE CUSTOMER ACCT # WELL NAME OTR/OTE | SECTION TWP RGE | COUNTY FORMATION |
|--|----------------------------------|------------------------|
| 5-9-00 Liberty South #2 | | |
| | | |
| CHARGETO United Cities | OWNER | |
| | | |
| MAILING ADDRESS | OPERATOR | |
| | | |
| CITY | CONTRACTOR | |
| STATE ZIP CODE | DISTANCE TO LOCATION | |
| | DISTANCE TO LOCATION | |
| TIME ARRIVED ON LOCATION | TIME LEFT LOCATION | |
| WELL DATA | _ | |
| HOLE SIZE 718 | <u> </u> | PE OF TREATMENT |
| TOTAL DEPTH | [] SURFACE PIPE | [] ACID BREAKDOWN |
| CASING SIZE 5 1/2 | PRODUCTION CASING | |
| CASING DEPTH 471' | M LUCACION CASING | [] ACID STIMULATION |
| CASING WEIGHT | [] SQUEEZE CEMENT | [] ACID SPOTTING |
| CASING CONDITION | [] PLUG & ABANDON | []FRAC |
| · · · · · · · · · · · · · · · · · · · | | |
| TUBING SIZE | [] PLUG BACK | [] FRAC + NITROGEN |
| TUBING DEPTH | [] MISC PUMP | [] FOAM FRAC |
| TUBING WEIGHT TUBING CONDITION DECEMBED | [] OTHER | [] NITROGEN |
| TUBING CONDITION PECELVED KANSAS CORPORATION COMMISSION | Tomen | [] MITAGEN |
| PACKER DEPTH KANSAS CORPORATION COMMISSION | | |
| to contain the containing and the containing of the containing and the containing of | PRI | ESSURE LIMITATIONS |
| PERFORATIONS ALIC 0.3 2000 | OUDS OF DUDS | THEORITICAL INSTRUCTED |
| SHOTS/FT AUG CO | SURFACE PIPE ANNULUS LONG STRING | |
| OPEN HOLE | TUBING | |
| CANOCDVATION DIVISION | | |
| WICHITA, NS | | |
| INSTRUCTIONS PRIOR TO JOB | | |
| | | |
| | | |
| JOB | SUMMARY | `` |
| DESCRIPTION OF JOB EVENTS (10+ Circulation Can | Igel w/h-1/x + | hen 75 sts. Hotland |
| 290 coline 290cel 1/4 Flo idrained | la displant to | 471° Shoe wouldn't |
| 1.1.20 | 19 20 20 | The Spot Wood AT |
| 277, and somme MIT at 350# shin | ' 12 y' | |
| | , | |
| | | |
| | | |
| | | |
| | | |
| PRESSURE SUMMARY | | TREATMENT RATE |
| BREAKDOWN or CIRCULATING psi | BREAKDOWN BPM | |
| FINAL DISPLACEMENT psi | INITIAL BPM | |
| ANNULUS psi | FINAL BPM | |
| MAXIMUM psi MINIMUM psi | MINIMUM BPM . | |
| AVERAGE psi | MAXIMUM BPM AVERAGE BPM | |
| ISIP psi | | |
| 5 MIN SIP psi | · . | |
| 15 MIN SIP psi | HYD HHP = RATE x PRESSUR | E x 40.8 |
| AUTHORIZATION TO PROCEED | TITLE | DATE |

CONSOLIDATED INDUSTRIAL SERVICES, INC. 21.1 W. 14TH STREET, CHANUTE, KS 66720 '316-431-9210 OR 800-467-8676

| •, | ORIGINAL |
|-------------|--------------|
| TICKET NUMB | SER 13224 |
| LOCATION BO | Alex How are |

FIELD TICKET

| DATE CUSTOMER ACCT # WELL NAME | QTR/QTR | SECTION | TWP | RGE | COUNTY | FORMATION |
|--------------------------------|------------------------|----------------|------|-------|--|--------------------------------|
| | N. CONTRACTOR LANGUAGE | | | | Mar. | ** - 5.28 5/8* - 2* - 2 |
| CHARGE TO United Cities | | OWNER | | | | |
| | · 20 | | | | | |
| MAILING ADDRESS | (| OPERATOR | | | | |
| | <u></u> | Name (1981) of | « | 1 was | 263. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | A CONTRACTOR |
| CITY & STATE | | CONTRACT | OR · | · | | |

| ACCOUNT CODE | QUANTITY or UNITS | DESCRIPTION OF SERVICES OR PRODUCT | UNIT PRICE | TOTAL AMOUNT |
|-----------------|-------------------|-------------------------------------|-----------------|-----------------|
| 5901 | 1 | PUMP CHARGE Production Cos. | | 475.00 |
| 5 XO2 | 471 | Fratage | | 47.10 |
| | | HYDRAULIC HORSE POWER | | |
| | | | | |
| | | | | |
| 1102 | 3-h- | Colein | | 60.70 |
| 1118 | € 5AS. | wel | | 31.50 |
| 1107 | 15k. | Fro sel | | 33.55 |
| 1105 | 15%. | H 11e | | 11.50 |
| 4405 | 1 | 51/2 1/114 | | 79.00 |
| 4119 | 1 | 51/2 (1. 15 shor | | 114.00 |
| 4109 | 7.9 | 5/2 the short | | 87.00 |
| | | | | |
| | | | | |
| | | | | |
| . (./ | | RECEIVED | | _ |
| | | KANSAS CORPORATION COMMISSI | DN | |
| | | STAND BY TIME | | |
| ·. 3 | | MILEAGE AUG 0 3 2000 | | |
| | | WATER TRANSPORTS | | |
| 550 2 | 3hec. | VACUUM TRUCKS CONSERVATION DIVISION | | 145.00 |
| • | | FRAC SAND WICHITA, KS | | |
| · | | | | <u></u> |
| 1104 | 755kg | CEMENT | | |
| | | | | 615.00 |
| | | NITROGEN | 1 | 49.78 |
| 5407 | | TON-MILES | <u> </u> | 125.00 |
| ISCO #15097 | · | | ESTIMATED TOTAL | 1853.73 |

| CUSTOMER or AGENTS SIGNATURE | | CIS FOREMAN | |
|----------------------------------|---|----------------|--|
| | • | <u>-</u> | |
| CUSTOMER or AGENT (PLEASE PRINT) | | DATE 4- (1-(n) | |