

Handwritten initials/signature

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 30604

Name: Raydon Exploration, Inc

Address 1: 1601 NW Expressway, Suite 1300

Address 2: _____

City: Oklahoma City State: OK Zip: 73118 + 1462

Contact Person: David E. Rice

Phone: (620) 624-0156

CONTRACTOR: License # 34127

Name: Tomcat

Wellsite Geologist: Ed Grieves

Purchaser: _____

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.: RA 11/18/08

11/6/08 11/17/08 11/19/08

Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

API No. 15 - 119-21227-00-00

Spot Description: _____

E2 SW NW Sec. 34 Twp. 32 S. R. 26 East West

1980 Feet from North / South Line of Section

990 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Meade

Lease Name: Post Well #: 1-4

Field Name: Wildcat

Producing Formation: N/A

Elevation: Ground: 2484' Kelly Bushing: 2496'

Total Depth: 5710' Plug Back Total Depth: N/A

Amount of Surface Pipe Set and Cemented at: 1649' 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/ _____
Alt 2 - Dig - 3/30/09 (sx cm)

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 on 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.

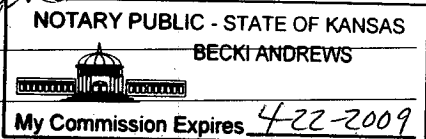
Signature: David E Rice

Title: Agent Date: 2/26/2009

Subscribed and sworn to before me this 26 day of February

20 09
Notary Public: Becki Andrews

Date Commission Expires: _____



KCC Office Use ONLY

Letter of Confidentiality Received

If Denied, Yes Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

RECEIVED
MAR 02 2009

Operator Name: Raydon Exploration, Inc Lease Name: Post Well #: 1-4
 Sec. 22 Twp. 26 S. R. 26 East West County: Meade

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface test, along with final chart(s). Attach extra sheet if more space is needed. Attach copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: Spectral Density Dual Spaced Neutron Log Array Compensated True Resistivity Log Microlog Log	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:70%;">Name</td> <td style="width:15%;">Top</td> <td style="width:15%;">Datum</td> </tr> <tr> <td>Heebner</td> <td>4409</td> <td></td> </tr> <tr> <td>Marmaton</td> <td>5116</td> <td></td> </tr> <tr> <td>Pawnee</td> <td>5221</td> <td></td> </tr> <tr> <td>Ft. Scott</td> <td>5257</td> <td></td> </tr> <tr> <td>Cherokee</td> <td>5280</td> <td></td> </tr> <tr> <td>Chester</td> <td>5483</td> <td></td> </tr> </table>	Name	Top	Datum	Heebner	4409		Marmaton	5116		Pawnee	5221		Ft. Scott	5257		Cherokee	5280		Chester	5483	
Name	Top	Datum																				
Heebner	4409																					
Marmaton	5116																					
Pawnee	5221																					
Ft. Scott	5257																					
Cherokee	5280																					
Chester	5483																					

CASING RECORD <input checked="" type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
		8-5/8"	24#	1649'	A-con	550	3% CC, 1/4# Cellflake

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth

TUBING RECORD: Size: Set At: Packer At: Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Date of First, Resumed Production, SWD or Enhr. Dry	Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
Estimated Production Per 24 Hours	Oil Bbls. Gas Mcf Water Bbls. Gas-Oil Ratio Gravity

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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TREATMENT REPORT

Customer: <i>Raydon Exploration</i>	Lease No.:	Date:
Lease: <i>Post</i>	Well #: <i>1-11</i>	<i>KCC WICHITA</i>
Field Order #: <i>21182</i>	Station: <i>Liberal</i>	Casing: <i>4 1/2 DR</i>
Type Job: <i>PTA</i>	Formation: <i>CNW</i>	Depth: <i>472-26</i>
		County: <i>Madde</i>
		State: <i>Ks</i>

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME	
Casing Size	Tubing Size	Shots/Ft		Acid	DATE	PRESS	ISIP
		<i>150 sk</i>		<i>20/40 Poz - 9%</i>	<i>Total gel</i>		
Depth	Depth	From	To	Pre Pad	Max		5 Min.
		<i>1.5</i>	<i>4 3/4</i>	<i>7.5 gal/sk</i>	<i>@ 13.5</i>		
Volume	Volume	From	To	Pad	Min		10 Min.
Max Press	Max Press	From	To	Frac	Avg		15 Min.
Well Connection	Annulus Vol.	From	To		HHP Used		Annulus Pressure
Plug Depth	Packer Depth	From	To	Flush	Gas Volume		Total Load

Customer Representative: <i>T. Thompson</i>	Station Manager: <i>J. Bennett</i>	Treater: <i>M. Cochran</i>
Service Units: <i>21755</i>	<i>27808</i>	<i>19555</i>
Driver Names: <i>Cochran</i>	<i>McCulley</i>	<i>Rios</i>
	<i>8122</i>	<i>19873</i>

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
<i>17:30</i>					<i>on Loc. / Held Safety Meeting</i>
					<i>D.P. set @ 165.3'</i>
<i>18:41</i>	<i>2000</i>				<i>Test Lines</i>
<i>18:47</i>	<i>100</i>		<i>10</i>	<i>4</i>	<i>Start H₂O Ahead</i>
<i>18:49</i>	<i>150</i>		<i>13.5</i>	<i>4</i>	<i>Start CMT 50sk @ 13.5*</i>
<i>18:54</i>	<i>100</i>		<i>0</i>	<i>4</i>	<i>Start H₂O Behind</i>
<i>18:54</i>	<i>100</i>		<i>3</i>	<i>9</i>	<i>Switch over to rig for Mud Disp.</i>
<i>18:56</i>			<i>18</i>	<i>0</i>	<i>Rig shut down + Check flowback</i>
					<i>Rig tripping D.P.</i>
					<i>D.P. @ 596'</i>
<i>19:35</i>	<i>200</i>		<i>10</i>	<i>6</i>	<i>Start H₂O Ahead</i>
<i>19:37</i>	<i>200</i>		<i>13.5</i>	<i>5</i>	<i>Start CMT 50sk @ 13.5*</i>
<i>19:39</i>	<i>100</i>		<i>0</i>	<i>5</i>	<i>Start Disp.</i>
<i>19:41</i>	<i>0</i>		<i>5</i>	<i>0</i>	<i>Shutdown + Check flowback</i>
					<i>Rig Tripping D.P.</i>
					<i>D.P. set @ 60'</i>
<i>20:15</i>	<i>100</i>		<i>5</i>	<i>3</i>	<i>Start CMT 20sk @ 13.5*</i>
	<i>1</i>				<i>Switch to Mouse Hole</i>
<i>20:18</i>	<i>100</i>		<i>4</i>	<i>3</i>	<i>Pump 15sk @ 13.5* Switch</i>
<i>20:20</i>	<i>100</i>		<i>4</i>	<i>3</i>	<i>to Rat Hole Pump 15sk @ 13.5*</i>
<i>20:45</i>					<i>End Job</i>

Cement Callsheet



BASIC
ENERGY SERVICES

Company	RAYDON EXPLORATION			API Number	15-119-21227		
Well Type	CONTRACTOR	TOM CAT RIG I	COUNTY	MEADE	STATE	KS	
LEASE	POST	WELL #	1-4	SEC	4	TWP	32
RANGE		26		DIRECTIONS:			

MEADE KS - 8 1/2 MILES EAST ON HWY 160 - 1/2 NORTH - EAST INTO

Surface	YES	Long String	Squeeze	Casing Size	8 5/8	Thread	8RD	Weight	24
PTA	Intermediate	Liner	Tubing/Drill Pipe Size	Thread	Weight				
Equipment	1 PUMP TRK & 2 BULK TRKS			Hole Size	12 1/4	Packer	Bridge Plug		
Remarks:	YES		Squeeze Manifold	Mud					

CEMENT DATA

LEAD	Weight PPG	Type	Additives	
CL101	11.5	'A-Con' Blend	3% CALCIUM CHLORIDE, 1/4# CELLFLAKE, .2% WCA	
Sacks	Excess	Yield FT/sk	Water Gal/sk	
400	100%	2.97	18.50	
TAIL	Weight PPG	Type	Additives	
CL100	15.00	Premium / Common	2% CALCIUM CHLORIDE, 1/4# CELLFLAKE	
Sacks	Excess	Yield FT/sk	Water Gal/sk	
150	100%	1.33	6.34	
LEAD	Weight PPG	Type	Additives	
0	0			
Sacks	Excess	Yield FT/sk	Water Gal/sk	
0	0%	0	0	
TAIL	Weight PPG	Type	Additives	
0	0			
Sacks	Excess	Yield FT/sk	Water Gal/sk	
0	0%	0	0	

FLOAT EQUIPMENT

PART #	Quantity	DESCRIPTION	# USED	# RETURNED
CF1453	1	Flapper Type Insert Float Valves, 8 5/8" (Blue)		
CF1753	3	Centralizer, 8 5/8" (Blue)		
CF1903	1	8 5/8" Basket (Blue)		
CF253	1	Guide Shoe - Regular, 8 5/8" (Blue)		
CF503	1	8 5/8" Stop Ring		
CF105	1	Top Rubber Cement Plug, 8 5/8"		
CF3000	1	Industrial Rubber Thread Lock Kit		
0	0			
0	0			
0	0			
0	0			
0	0			

Ordered By	TIM THOMPSON	PHONE	620-388-4401	Date of Job	11/05/08
Call Taken By	TYCE DAVIS			Time Ready	
Operator or Driver				Call Out Time	
Called					

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