

ORIGINAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Form ACO-1
September 1999
Form Must Be Typed

Operator: License # 33019
Name: Rosewood Resources, Inc.
Address: 2711 N. Haskell Ave., Suite 2800, LB 22
City/State/Zip: Dallas, TX 75201
Purchaser: _____
Operator Contact Person: Tom Roelfs
Phone: (785) 332-0374
Contractor: Name: Advanced Drilling Technologies LLC
License: 33532
Wellsite Geologist: Steven VonFeldt

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SIOW Temp. Abd.
 Gas ENHR SIGW
 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./SWD
 Plug Back Plug Back Total Depth
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Enhr.?) Docket No. _____

9/23/2008	10/5/2008	10/5/2008
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 023-21132-0000
County: Cheyenne
NW NE SW SE Sec. 9 Twp. 3 S. R. 41 East West
1075 feet from (S) N (circle one) Line of Section
1829 feet from (E) W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE (SE) NW SW
Lease Name: R. Walter Well #: 34-09A
Field Name: St. Francis

Producing Formation: Niobrara
Elevation: Ground: 3591' Kelly Bushing: 3602'
Total Depth: 5440' Plug Back Total Depth: 5400'
Amount of Surface Pipe Set and Cemented at 271' 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 I - Dlg - 3/26/09 ^{9x cmt}

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content 5000 ppm Fluid volume 220 bbls
Dewatering method used Evaporation
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: Jannell Gerwe
Title: Production Asst Date: 12/23/08
Subscribed and sworn to before me this 22 day of January
09
Notary Public: Kathy Roelfs

KCC Office Use ONLY

Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

Date 10-30-09
NOTARY PUBLIC
KATHY ROELFS
My Appt. Exp. 10-30-09

Operator Name: Rosewood Resources, Inc. Lease Name: R. Walter Well #: 34-09A
 Sec. 9 Twp. 3 S. R. 41 East West County: Cheyenne

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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Attach Additional Sheets) 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 (Submit Copy) List All E. Logs Run: Platform Express Triple Combo, CBL	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum Niobrara KB <p style="text-align: center;">KANSAS CORPORATION COMMISSION</p> <p style="text-align: center;">JAN 29 2009</p> <p style="text-align: center;">RECEIVED</p>
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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
Surface	12 1/4"	8 5/8"	24#	271'	Neat	173	
Production	6 1/4"	4 1/2"	10.5#	5415'	Neat		

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				

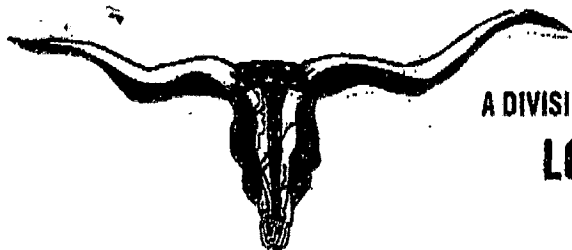
Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
4	4644' to 4654'	1000 GALS 15% HCL ACID	

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	2 3/8			

Date of First, Resumerd Production, SWD or Enhr. 11/21/2008	Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
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Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	10	N/A	42		

Disposition of Gas	METHOD OF COMPLETION	Production Interval
<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, Submit ACO-18.)	<input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	_____



A DIVISION OF ADVANCED DRILLING TECHNOLOGIES, LLC.

FIELD SERVICE TICKET AND INVOICE

LONGHORN CEMENTING CO.

P.O. BOX 203 YUMA, COLORADO 80789
Phone: 970-848-0799 Fax: 970-848-0798

DATE 09-23-08 TICKET NO. 1797

Main form containing job details: DATE OF JOB, DISTRICT, CUSTOMER (Rosewood), LEASE (Walter R 34-09 A), ADDRESS, COUNTY, STATE, CITY, SERVICE CREW (MJKR-Brod), EQUIPMENT (UNIT #112), TYPE JOB (Surface), DEPTH (173 FT), SACKS (173), etc.

CONTRACT CONDITIONS: (This contract must be signed before the job is commenced or merchandises is delivered).

The undersigned is authorized to execute this contract as an agent of the customer. As such, the undersigned agrees and acknowledges that this contract for services, materials, products, and/or supplies includes all of and only these terms and conditions appearing on the front and back of this document.

SIGNED: [Signature] (WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

Table with columns: ITEM / PRICE REF NUMBER, MATERIAL, EQUIPMENT AND SERVICES USED, UNIT, QUANTITY, UNIT PRICE, \$ AMOUNT. Includes entries for Depth charge, Mileage, Cement, and a RECEIVED stamp from KANSAS CORPORATION COMMISSION dated JAN 29 2009.

ACID DATA table with columns: GALLONS, %, ADDITIVES. Rows for HCL.

SUB TOTAL and TAX summary table with columns: SERVICE & EQUIPMENT, MATERIALS, % TAX ON \$, TOTAL.

SERVICE REPRESENTATIVE [Signature] THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: [Signature]