

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

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

Operator: License # 33325
 Name: Petroleum Development Corporation
 Address: 1775 Sherman Street, Suite 3000
 City/State/Zip: Denver, CO 80203
 Purchaser: Priority Oil & Gas
 Operator Contact Person: Larry Robbins
 Phone: (303) 860-5800
 Contractor: Name: Schaaf Drilling, Co. LLC & Advanced Drilling Technologies, LLC
 License: 33775 & 33532
 Wellsite Geologist: N/A

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. _____

<u>03/03/2008</u>	<u>03/06/2008</u>	<u>03/13/2008</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 023-20955-0000

County: Cheyenne

NE SE SE Sec. 19 Twp. 5 S. R. 41 East West

990 feet from N (circle one) Line of Section

330 feet from W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW

Lease Name: Bandel Well #: 44-19

Field Name: Cherry Creek Niobrara Gas Area

Producing Formation: Niobrara

Elevation: Ground: 3670' Kelly Bushing: 3682'

Total Depth: 1670' Plug Back Total Depth: 1630'

Amount of Surface Pipe Set and Cemented at 9 joints @ 379 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 AH I NR 3-11-09
 (Data must be collected from the Reserve Pit)

Chloride content 5000 ppm Fluid volume 50 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: [Signature]

Title: Regulatory Agent Date: January 29, 2009

Subscribed and sworn to before me this 29 day of January

2009

Notary Public: [Signature]

SARAH M GARRETT
 Notary Public
 State of Colorado

Date Commission Expires: _____

My Commission Expires August 11, 2009

KCC Office Use ONLY

Letter of Confidentiality Received

If Denied, Yes Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

Operator Name: Petroleum Development Corporation Lease Name: Bandel Well #: 44-19
 Sec. 19 Twp. 5 S. R. 141 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 <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: CDL, CNL, Dual Induction, CBL	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum Niobrara 1461'
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CONSERVATION DIVISION
WICHITA, KS

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	11"	7"	17#	379'	Type I/II	100	
Production	6 1/8"	4 1/2"	10.5 #	1651'	Type I/II	75	2% KCL

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 <i>(Amount and Kind of Material Used)</i>	
			Depth
2	1484'-1496'	500 gal 15% HCL, 70 Quality N2 foam,	1484'-1496'
		347 bbls Lightning 15# fluid system,	
		96780 lbs of Ottawa 12/20 mesh sand	
		4000 lbs of SB Excel 12/20 resin coated sand	
		357 MSCF N2	

TUBING RECORD	Size 1 1/2"	Set At 1479'	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Date of First, Resumerd Production, SWD or Enhr. 10/30/2008	Producing Method <input checked="" type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
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Estimated Production Per 24 Hours	Oil Bbls. 0	Gas Mcf 77	Water Bbls. 0	Gas-Oil Ratio n/a	Gravity
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Disposition of Gas Vented Sold Used on Lease *(If vented, Submit ACO-18.)*

METHOD OF COMPLETION

Open Hole Perf. Dually Comp. Commingled _____

Other (Specify) _____

Production Interval

SCHAAL DRILLING, CO.
PO BOX 416
BURLINGTON, CO. 80807
719-346-8032
FIELD REPORT
SURFACE CASING, DRILLING AND CEMENTING

DRILLING DATE 3-03-08

WELL NAME & LEASE # Bandel 44-19

MOVE IN, RIG UP, DIG PITS ETC. DATE 3-01-08 TIME 2:00 AM PM

SPUD TIME 8:00 AM PM SHALE DEPTH 215 TIME 10:00 AM PM

HOLE DIA. 11 FROM 0 TO 370 TD TIME 12:15 AM PM

CIRCULATE, T.O.O.H., SET 365.54 FT CASING 378.54 KB FT DEPTH

9 JOINTS 7 OD #/FT 14 15.5 17 20 23

PUMP 100 SAC CEMENT 603 GAL.DISP. CIRC. 8 BBL TO PIT

PLUG DOWN 2:15 AM PM DATE 3-03-08

CEMENT LEFT IN CSG. 30 FT TYPE: PORTLAND CEMENT I/II ASTM C 150
CENTRALIZER 1 CEMENT COST \$ 1964.39

ELEVATION 3670
+12KB 3682

PIPE TALLY

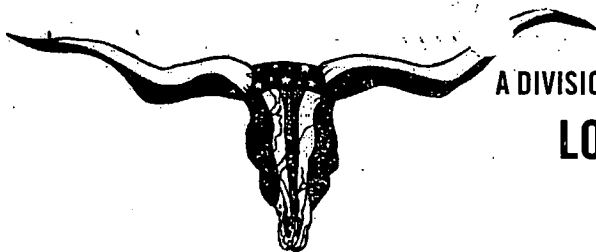
1. 38.44
2. 39.12
3. 39.09
4. 38.98
5. 42.88
6. 42.27
7. 42.35
8. 43.28
9. 39.13
- 10.
- 11.
- 12.
- 13.
- 14.

TOTAL 365.54

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A DIVISION OF ADVANCED DRILLING TECHNOLOGIES, LLC.

LONGHORN CEMENTING CO.

P.O. BOX 203 YUMA, COLORADO 80759
 Phone: 970-848-0799 Fax: 970-848-0798

FIELD SERVICE TICKET
 AND INVOICE

DATE 3-6-08 TICKET NO. 1533

DATE OF JOB <u>3-6-08</u>	DISTRICT	NEW WELL <input checked="" type="checkbox"/>	OLD WELL <input type="checkbox"/>	PROD <input type="checkbox"/>	INJ <input type="checkbox"/>	WDW <input type="checkbox"/>	CUSTOMER ORDER NO.:
CUSTOMER <u>PDC</u>	LEASE <u>Bendel</u>	44-19		WELL NO.			
ADDRESS	COUNTY	STATE					
CITY	STATE	SERVICE CREW <u>Dave + Damon</u>					
AUTHORIZED BY	EQUIPMENT <u>112</u>						
TYPE JOB <u>Logging</u>	DEPTH	FT.	CEMENT DATA: BULK <input type="checkbox"/>		SAND DATA: SACKS <input type="checkbox"/>		TRUCK CALLED
SIZE HOLE: <u>2 7/8</u>	DEPTH	FT.	SACKS	BRAND	TYPE	% GEL	ADMIXES
SIZE & WT. CASTING <u>NEW 412</u>	DEPTH	FT.	<u>25</u>	<u>A</u>	<u>FLU</u>		
SIZE & WT. D PIPE OR TUBING	DEPTH	FT.					
TOP PLUGS	TYPE:	WEIGHT OF SLURRY: <u>1.5</u>		LBS. / GAL.	LBS. / GAL.	DATE AM PM	
		VOLUME OF SLURRY				ARRIVED AT JOB	
		<u>25</u> SACKS CEMENT TREATED WITH <u>2</u> % OF <u>HCL</u>				START OPERATION	
<u>PB/D</u>	MAX DEPTH <u>164.0</u> FT.	MAX PRESSURE		P.S.I.		FINISH OPERATION	
						RELEASED	
						MILES FROM STATION TO WELL	

CONTRACT CONDITIONS: (This contract must be signed before the job is commenced or merchandise 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. No additional or substitute terms and/or conditions shall become a part of this contract without written consent or an officer of Advanced Drilling Technologies, LLC.

SIGNED: _____
 (WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

ITEM / PRICE REF. NUMBER	MATERIAL, EQUIPMENT AND SERVICES USED	UNIT	QUANTITY	UNIT PRICE	\$ AMOUNT
<u>0X-2</u>	<u>Depth Charge Cement Mixture</u> <u>As per contract</u>				<u>4300</u> <u>00</u>
<u>300-12</u>	<u>7" centralizer</u>		<u>1</u>		<u>36</u> <u>44</u>
<u>400-2</u>	<u>calcium</u>		<u>50</u> <u>16</u>		<u>50</u> <u>00</u>
<u>400-4</u>	<u>Kcl</u>		<u>100</u> <u>16</u>		<u>40</u> <u>30</u>
					<u>4426</u> <u>74</u>
<u>145</u> <u>40</u>	<u>Flush</u>		<u>20</u>		
<u>145</u> <u>50</u>	<u>Cement</u>		<u>18</u>		
<u>1400</u>	<u>Displacement</u>		<u>26.01</u>		
<u>1910</u>	<u>Plug Band @ 1900 psi</u>				

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ACID DATA:			
	GALLONS	%	ADDITIVES
HCL			
HCL			

SUB TOTAL		
SERVICE & EQUIPMENT	%TAX ON \$	
MATERIALS	%TAX ON \$	
TOTAL		

THANK YOU

SERVICE REPRESENTATIVE <u>[Signature]</u>	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY <u>[Signature]</u>
FIELD SERVICE ORDER NO.	(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)