

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 33190
Name: Noble Energy, Inc.
Address: 1625 Broadway, Suite 2200
City/State/Zip: Denver, CO 80202
Purchaser: Southern Star
Operator Contact Person: Jennifer Barnett
Phone: (303) 228-4235
Contractor: Name: Excell Services Inc., Wray, CO
License: 8273
Wellsite Geologist: none

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: n/a

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. _____

12/17/2008	12/18/2008	1/9/2009
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 023-21202-00-00

County: Cheyenne

SE SE NW NE Sec. 18 Twp. 2 S. R. 38 East West

1,200' feet from S / (N) (circle one) Line of Section

1,600' feet from (E) W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) (NE) SE NW SW

Lease Name: Keller Farms Well #: 31-18

Field Name: Cherry Creek Niobrara Gas Area

Producing Formation: Niobrara

Elevation: Ground: 3351' Kelly Bushing: 3360'

Total Depth: 1527' Plug Back Total Depth: 1479'

Amount of Surface Pipe Set and Cemented at 229' cmt w/ 84 sx Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from n/a

feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan AH I n/c 3-31-09
(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 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.

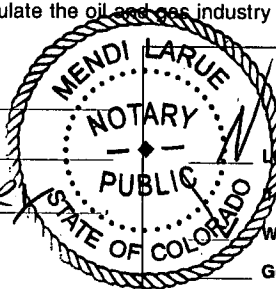
Signature: Jennifer Barnett

Title: Regulatory Analyst Date: 2/5/09

Subscribed and sworn to before me this 5th day of FEBRUARY

20 09
Notary Public: Mendi Larue

Date Commission Expires: My Commission Expires 09/11/2010



KCC Office Use ONLY

Letter of Confidentiality Received

Denied, Yes Date: _____

Wireline Log Received

Geologist Report Received **RECEIVED**
KANSAS CORPORATION COMMISSION

UIC Distribution

FEB 09 2009

CONSERVATION DIVISION
WICHITA, KS

Operator Name: Noble Energy, Inc. Lease Name: Keller Farms Well #: 31-18
 Sec. 18 Twp. 2 S. R. 38 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 type="checkbox"/> Yes <input checked="" 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: Triple Combo (DEN/NEU/IND), CBL/CCL/GR	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name <u>Niobrara</u> Top <u>1268'</u> Datum _____
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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	9 7/8"	7"	17 Lbs/Ft.	229'	50/50 POZ	84 sx	3% CaCl, .25% Flo-celc
Production	6-1/4"	4-1/2"	11.6 Lbs/Ft.	1518'	Lead Type III	32 sx	12% gel, 2% CaCl, .25% Polyflake
					Tail Type III	56 sx	2% gel, 1% CFL-80

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
3 SPF	Perf Niobrara interval from 1268'-1310'	Niobrara frac'd with 500 gals 7.5% HCL acid, 12,000 gals of	
	(42', 3spf, 126 holes) .41" EHD, 120 degree phase	25% CO2 foamed gel pad; 31,853 gals 25% CO2 foamed	
		gel carrying 100,100 lbs 16/30 sand. ATP-577 psi; ATR-16.2 bpm.	

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Date of First, Resumed Production, SWD or Enhr. 1/19/2009	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 70	Water Bbls. 0	Gas-Oil Ratio 0	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 _____

BISON OIL WELL CEMENTING, INC.



1738 Wynkoop St., Ste. 102
 Denver, Colorado 80202
 Phone: 303-296-3010
 Fax: 303-298-8149
 E-mail: bisonoil1@qwestoffice.net

INVOICE # 8150
 LOCATION Ks
 FOREMAN Rick L Bowen
Tom Randy Ben

TREATMENT REPORT

DATE	WELL NAME	SECTION	TWP	RGE	COUNTY	FORMATION
12-17-08	Kellers Farms 31-18	16	25	38W	Cherokee	

CHARGE TO <u>MEPherson</u>	OWNER
MAILING ADDRESS	OPERATOR <u>Scott</u>
CITY	CONTRACTOR <u>MEPherson</u>
STATE ZIP CODE	DISTANCE TO LOCATION
TIME ARRIVED ON LOCATION <u>12:15 P 12:10</u>	TIME LEFT LOCATION <u>1:30</u>

WELL DATA			PRESSURE LIMITATIONS		
HOLE SIZE <u>9 7/8</u>	TUBING SIZE	PERFORATIONS		THEORETICAL	INSTRUCTED
TOTAL DEPTH <u>225</u>	TUBING DEPTH	SHOTS/FT	SURFACE PIPE ANNULUS LONG		
	TUBING WEIGHT	OPEN HOLE	STRING		
CASING SIZE <u>7"</u>	TUBING CONDITION		TUBING		
CASING DEPTH <u>220</u>		TREATMENT VIA	TYPE OF TREATMENT		TREATMENT RATE
CASING WEIGHT <u>17</u>	PACKER DEPTH		<input checked="" type="checkbox"/> SURFACE PIPE	BREAKDOWN BPM	
CASING CONDITION <u>Good</u>			<input type="checkbox"/> PRODUCTION CASING	INITIAL BPM	
			<input type="checkbox"/> SQUEEZE CEMENT	FINAL BPM	
			<input type="checkbox"/> ACID BREAKDOWN	MINIMUM BPM	
			<input type="checkbox"/> ACID STIMULATION	MAXIMUM BPM	
			<input type="checkbox"/> ACID SPOTTING	AVERAGE BPM	
			<input type="checkbox"/> MISC PUMP		
			<input type="checkbox"/> OTHER	HYD HHP = RATE X PRESSURE X 40.8	

PRESSURE SUMMARY			
BREAKDOWN or CIRCULATING psi	AVERAGE psi		
FINAL DISPLACEMENT psi	5 MIN SIP psi		
ANNULUS psi	15 MIN SIP psi		
MAXIMUM psi			
MINIMUM psi			

INSTRUCTIONS PRIOR TO JOB MTRW safety meeting EST-CTRC
m-p 84 sls 500 PZ 3% BCCA 25 ABLEA 9.5 mix H₂O
Displace 9.0 BBLS H₂O shut in well wash up to pit
Rig Down

JOB SUMMARY
 DESCRIPTION OF JOB EVENTS MTRW 12:15 safety meeting 12:25
Cement 12:30 Displace 12:40
BBLS to pit 4
shut in well 12:45

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CONSERVATION DIVISION
 WICHITA, KS

[Signature] AUTHORIZATION TO PROCEED TITLE Miller DATE 12-17-08

Customers hereby acknowledges and specifically agrees to the terms and conditions on this work order, including, without limitation, the provisions on the reverse side hereof which include the release and indemnity.

BISON OIL WELL CEMENTING, INC.



1738 Wynkoop St., Ste. 102
 Denver, Colorado 80202
 Phone: 303-296-3010
 Fax: 303-298-8143
 E-mail: bisonoil1@qwestoffice.net

INVOICE # 8151
 LOCATION KS
 FOREMAN Alan L Dower
Justin
Don

TREATMENT REPORT

DATE	WELL NAME	SECTION	TWP	RGE	COUNTY	FORMATION
12-19-08	Keller Farm 31-18	18	25	38W	Cheyenne	

CHARGE TO <u>EXCEL</u>	OWNER
MAILING ADDRESS	OPERATOR <u>Green</u>
CITY	CONTRACTOR <u>EXCEL Rig 17</u>
STATE ZIP CODE	DISTANCE TO LOCATION
TIME ARRIVED ON LOCATION <u>12:15 R 12:00</u>	TIME LEFT LOCATION <u>6:00</u>

WELL DATA			PRESSURE LIMITATIONS		
HOLE SIZE <u>6 1/4</u>	TUBING SIZE	PERFORATIONS		THEORETICAL	INSTRUCTED
TOTAL DEPTH <u>1530</u>	TUBING DEPTH	SHOTS/FT	SURFACE PIPE ANNULUS LONG		
	TUBING WEIGHT	OPEN HOLE	STRING		
CASING SIZE <u>4 1/2</u>	TUBING CONDITION		TUBING		
CASING DEPTH <u>1508</u>		TREATMENT VIA	TYPE OF TREATMENT		TREATMENT RATE
CASING WEIGHT <u>11.6</u>	PACKER DEPTH		<input type="checkbox"/> SURFACE PIPE	BREAKDOWN BPM	
CASING CONDITION <u>Good</u>	<u>PBTD 1479</u>		<input checked="" type="checkbox"/> PRODUCTION CASING	INITIAL BPM	
PRESSURE SUMMARY			<input type="checkbox"/> SOEZE CEMENT	FINAL BPM	
BREAKDOWN or CIRCULATING psi	AVERAGE psi		<input type="checkbox"/> ACID BREAKDOWN	MINIMUM BPM	
FINAL DISPLACEMENT psi	ISIP psi		<input type="checkbox"/> ACID STIMULATION	MAXIMUM BPM	
ANNULUS psi	5 MIN SIP psi		<input type="checkbox"/> ACID SPOTTING	AVERAGE BPM	
MAXIMUM psi	15 MIN SIP psi		<input type="checkbox"/> MISC PUMP		
MINIMUM psi			<input type="checkbox"/> OTHER	HYD HHP = RATE X PRESSURE X 40.8	

INSTRUCTIONS PRIOR TO JOB mzrw safety meeting EST-CIAC
m-p 32 sks 50/50 Pac 12% BBG 2% BUA 80.25% BUA 12.1 mix H2O
m-p 56 sks 50/50 Pac 2% BBG 1% BLEL 80.25% BUA 12.8 mix H2O
Drop Plug Displace 22.9 BBLs H2O set Plug 1400 to 1500 PSI
check Float & latch wash up to pit Rig Down

JOB SUMMARY

DESCRIPTION OF JOB EVENTS mzrw 4:50 safety meeting 5:00

<u>Leat cement 5:00</u>	<u>tell cement 5:20</u>	<u>Drop Plug 5:25</u>
<u>Displace 5:20</u>	<u>time away</u>	<u>PSI</u>
	<u>5:31</u>	<u>10</u>
	<u>5:36</u>	<u>400</u>
	<u>5:45</u>	<u>set Plug 1500</u>

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FEB 09 2009

CONSERVATION DIVISION
 WICHITA, KS

[Signature] AUTHORIZATION TO PROCEED TITLE DATE 12-19-08

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