

ORIGINAL

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form ACO-1  
October 2008

RECEIVED Form Must Be Typed

KANSAS CORPORATION COMMISSION

WELL COMPLETION FORM  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 33186  
 Name: LB Exploration, Inc.  
 Address 1: 2135 2nd Road  
 Address 2: \_\_\_\_\_  
 City: Holyrood State: KS Zip: 67450 + \_\_\_\_\_  
 Contact Person: Michael Petermann  
 Phone: ( 785 ) 252-8034  
 CONTRACTOR: License # 33905  
 Name: Royal Drilling, Inc.  
 Wellsite Geologist: James C. Musgrove  
 Purchaser: NCRA  
 Designate Type of Completion:  
 New Well  Re-Entry  Workover  
 Oil  SWD  SLOW  
 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.: \_\_\_\_\_  
10/7/2008 10/14/2008 1-19-09  
 Spud Date or Date Reached TD Completion Date or  
 Recompletion Date Recompletion Date

API No. 15 - 053-21229-00 APR 14 2009  
 Spot Description: CONSERVATION DIVISION  
 NE 1120 NW 1129 SW 390 SW 4885 Sec. 33 Twp. 17 S. R. 10 WICHITA, KS  East  West  
 \_\_\_\_\_ Feet from  North /  South Line of Section  
 \_\_\_\_\_ Feet from  East /  West Line of Section  
 Footages Calculated from Nearest G.P.S. - KCC - Dig Outside Section Corner:  
 NE  NW  SE  SW  
 County: Ellsworth  
 Lease Name: Stumps Well #: 1  
 Field Name: Bloomer  
 Producing Formation: Arbuckle  
 Elevation: Ground: 1783' Kelly Bushing: 1790'  
 Total Depth: 3333' Plug Back Total Depth: \_\_\_\_\_  
 Amount of Surface Pipe Set and Cemented at: 522 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**  
 (Data must be collected from the Reserve Pit)  
 Chloride content: 48000 ppm Fluid volume: 400 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.: \_\_\_\_\_

API - Dig - 4/15/09

**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: President Date: 4/13/2009

Subscribed and sworn to before me this 13 day of April,  
20 09.

Notary Public: Lavenoia Smith  
 Date Commission Expires: 7-14-2009

**Lavenoia Smith**  
 Notary Public - State of Kansas  
 My Appt. Expires 7-14-2009

**KCC Office Use ONLY**

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

Operator Name: LB Exploration, Inc. Lease Name: Stumps Well #: 1  
 Sec. 33 Twp. 17 S. R. 10  East  West County: Ellsworth

**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<br><i>(Attach Additional Sheets)</i><br><br>Samples Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br><br>Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br><i>(Submit Copy)</i><br><br>List All E. Logs Run:<br><b>Dual Compensated Porosity, Dual Induction, Microresistivity</b> | <input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample<br><br>Name Top Datum<br>See attached |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------|

| CASING RECORD <input 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 casing                                                            | 12-1/4"           | 8-5/8"                    | 20#               | 522'          | common         | 250          | 3% cc 2% gel               |
| production                                                                | 7-7/8"            | 5-1/2"                    | 14#               | 3331'         | common         | 150          | 10% salt 5# gilsonite      |
|                                                                           |                   |                           |                   |               |                |              |                            |

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

| Shots Per Foot | PERFORATION RECORD - Bridge Plugs Set/Type<br>Specify Footage of Each Interval Perforated | Acid, Fracture, Shot, Cement Squeeze Record<br><i>(Amount and Kind of Material Used)</i> | Depth     |
|----------------|-------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------|-----------|
| 6              | 3259-3262                                                                                 | Gas gun                                                                                  | 3259-3262 |
|                |                                                                                           | 150 gal 7-1/2% MCA                                                                       | 3259-3262 |
| 6              | 3267-3270                                                                                 | 250 gal 15% MCA                                                                          | 3267-3270 |
|                |                                                                                           |                                                                                          |           |

|                                                                          |           |                                                                                                                                                                           |                                   |
|--------------------------------------------------------------------------|-----------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|
| TUBING RECORD: Size: <u>2-7/8"</u> Set At: <u>3282'</u> Packer At: _____ |           | Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                       |                                   |
| Date of First. Resumed Production, SWD or Enhr. <u>1/19/2009</u>         |           | Producing Method: <input type="checkbox"/> Flowing <input checked="" 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:<br><input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease<br><i>(If vented, Submit ACO-18.)</i> | METHOD OF COMPLETION:<br><input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled<br><input type="checkbox"/> Other (Specify) _____ | PRODUCTION INTERVAL:<br><div style="text-align: center; border: 1px solid black; padding: 5px;"> <b>RECEIVED</b><br/> <b>KANSAS CORPORATION COMMISSION</b> </div> |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

APR 14 2009

CONSERVATION DIVISION  
WICHITA, KS



# QUALITY OILWELL CEMENTING, INC.

Phone 785-483-2025  
Cell 785-324-1041

Home Office P.O. Box 32 Russell, KS 67665

APR 14 2009 No. 2107

|                     |               |          |            |                                                                                  |                                                                                                                                                                             |        |      |            |    |             |  |           |  |        |          |
|---------------------|---------------|----------|------------|----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|------|------------|----|-------------|--|-----------|--|--------|----------|
| Date                | 10-8-08       | Sec.     | 33         | Twp.                                                                             | 17                                                                                                                                                                          | Range  | 10   | Called Out |    | On Location |  | Job Start |  | Finish | 12:45 PM |
| Lease               | Stamos        | Well No. | 1          | Location                                                                         | 41056                                                                                                                                                                       | County | Rice | State      | KS |             |  |           |  |        |          |
| Contractor          | Royal Doby #2 |          |            |                                                                                  | Owner                                                                                                                                                                       | LBN    |      |            |    |             |  |           |  |        |          |
| Type Job            | Long Surface  |          |            |                                                                                  | To Quality Oilwell Cementing, Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed. |        |      |            |    |             |  |           |  |        |          |
| Hole Size           | 1 1/2"        |          | T.D.       | 522                                                                              |                                                                                                                                                                             |        |      |            |    |             |  |           |  |        |          |
| Csg.                | 88            |          | Depth      | 522                                                                              |                                                                                                                                                                             |        |      |            |    |             |  |           |  |        |          |
| Tbg. Size           |               |          | Depth      |                                                                                  |                                                                                                                                                                             |        |      |            |    |             |  |           |  |        |          |
| Drill Pipe          |               |          | Depth      |                                                                                  |                                                                                                                                                                             |        |      |            |    |             |  |           |  |        |          |
| Tool                |               |          | Depth      | The above was done to satisfaction and supervision of owner agent or contractor. |                                                                                                                                                                             |        |      |            |    |             |  |           |  |        |          |
| Cement Left in Csg. | 1045          |          | Shoe Joint |                                                                                  |                                                                                                                                                                             |        |      |            |    |             |  |           |  |        |          |
| Press Max.          |               |          | Minimum    |                                                                                  |                                                                                                                                                                             |        |      |            |    |             |  |           |  |        |          |
| Meas Line           | 22#           |          | Displace   | 3 1/4"                                                                           |                                                                                                                                                                             |        |      |            |    |             |  |           |  |        |          |
| Perf.               | <b>CEMENT</b> |          |            |                                                                                  |                                                                                                                                                                             |        |      |            |    |             |  |           |  |        |          |

| EQUIPMENT |    |                     | Amount Ordered       |
|-----------|----|---------------------|----------------------|
| Pumptrk   | 5  | No. Cementer Helper | 250 man 30 cc 2% gel |
| Bulktrk   | 8  | No. Driver          | Consisting of        |
| Bulktrk   | pu | No. Driver          | Common               |
|           |    | No. Driver          | Poz. Mix             |

| JOB SERVICES & REMARKS |       |          |
|------------------------|-------|----------|
| Pumptrk Charge         |       | Gel.     |
| Mileage                |       | Chloride |
| Footage                |       | Hulls    |
|                        |       | Salt     |
|                        | Total | Flowseal |

Remarks:

Cement

Handling

Mileage

Sub Total

Total

Floating Equipment & Plugs 88 SATD

Squeeze Manifold Rubber

Rotating Head

RECEIVED KANSAS CORPORATION COMMISSION APR 14 2009 CONSERVATION DIVISION WICHITA, KS

Tax

Discount

Total Charge

X Signature