

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

2/13/10

Form ACO-1
October 2008
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 31885
Name: M & M Exploration, Inc.
Address 1: 60 Garden Center, Suite 102
Address 2:
City: Broomfield State: CO Zip: 80020
Contact Person: Mike Austin
Phone: (303) 438-1991
CONTRACTOR: License # _____
Name: _____
Wellsite Geologist: _____
Purchaser: _____

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KCC

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: M & M Exploration, Inc.
Well Name: Z Bar 9-10
Original Comp. Date: 3/4/02 Original Total Depth: 4925
____ 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.: D-30,245
11/19/09 _____ Feb. 12, 2009
Spud Date or _____ Date Reached TD _____ Completion Date or _____
Recompletion Date _____ Recompletion Date _____

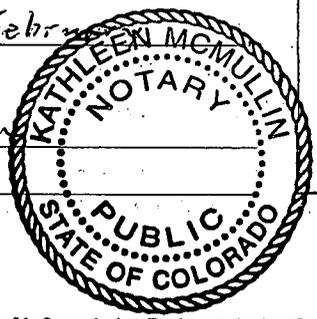
API No. 15 - 007-22696-0000 0001
Spot Description: _____
SE NW
E2 W2 SE Sec. 9 Twp. 34 S. R. 15 East West
1400 1422 Feet from North / South Line of Section
1400 1378 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner: Per GSA 2/12/09
 NE NW SE SW
County: Barber
Lease Name: Z Bar Well #: 9-10
Field Name: _____
Producing Formation: _____
Elevation: Ground: 1597 Kelly Bushing: 1611
Total Depth: _____ Plug Back Total Depth: 4025
Amount of Surface Pipe Set and Cemented at: _____ 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: _____ 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: Mike Austin
Title: President Date: February 12, 2009
Subscribed and sworn to before me this 13th day of February
20 09
Notary Public: Kathleen McMullin
Date Commission Expires: 6.13.2009



KCC Office Use ONLY

Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution (RS 2/19) **RECEIVED**
KANSAS CORPORATION COMMISSION

FEB 19 2009

CONSERVATION DIVISION
WICHITA, KS

My Commission Expires 06/13/2009