

CONFIDENTIAL

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

5/11/10

OPERATOR: License # 6569

API No.: 15 - 009-25306-0000

Name: Carmen Schmitt Inc.

Spot Description: 50' N, 70' E S/2 SW NW

Address 1: P.O. Box 47

S/2 SW NW Sec. 36 Twp. 16 S. R. 15 East West

Address 2: 915 Harrison

2260 Feet from North / South Line of Section

City: Great Bend State: KS Zip: 67530 + 0047

730 Feet from East / West Line of Section

Contact Person: Carmen Schmitt

Footages Calculated from Nearest Outside Section Corner:

Phone: (620) 793-5100

NE NW SE SW

CONTRACTOR: License # 4958 **CONFIDENTIAL**

County: Barton

Name: Mallard J.V. Inc. **MAY 11 2009**

Lease Name: Shaffer Well #: 3

Wellsite Geologist: Tom Funk **KCC**

Field Name: _____

Purchaser: NCRA

Producing Formation: Kansas City

Designate Type of Completion:

Elevation: Ground: 1992 Kelly Bushing: 1997

- New Well Re-Entry Workover
- Oil SWD SLOW
- Gas ENHR SIGW
- CM (Coal Bed Methane) Temp. Abd.
- Dry Other _____
(Core, WSW, Expl., Cathodic, etc.)

Total Depth: 3515 Plug Back Total Depth: 3468

Amount of Surface Pipe Set and Cemented at: 470 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.

If Workover/Re-entry: Old Well Info as follows:

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Operator: _____

Chloride content: 51,000 ppm Fluid volume: 1000 bbls

Well Name: _____

Dewatering method used: Evaporation

Original Comp. Date: _____ Original Total Depth: _____

Location of fluid disposal if hauled offsite: _____

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.: _____

2-18-09 2-25-09 4-10-09

Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

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.

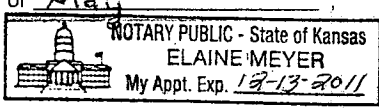
Signature: Carmen Schmitt

Title: Operations Manager Date: 5-11-09

Subscribed and sworn to before me this 11 day of May

20 09

Notary Public: Elaine Meyer



Date Commission Expires: 12-13-2011

KCC Office Use ONLY

Letter of Confidentiality Received

If Denied, Yes Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

KANSAS CORPORATION COMMISSION

MAY 15 2009

RECEIVED