

CONFIDENTIAL

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

4/17/09

Operator: License # 5135
Name: JOHN O. FARMER, INC.
Address: P.O. Box 352
City/State/Zip: Russell, KS 67665
Purchaser: _____
Operator Contact Person: Marge Schulte
Phone: (785) 483-3145, Ext. 214
Contractor: Name: Discovery Drilling Co., Inc.
License: 31548
Wellsite Geologist: Brad Hutchinson

Acct. No. 15 - 167-23,562-00-00
County: Russell SENESESW
150' 80' of Sec. 2 Twp. 15 S. R. 13W East West
840 feet from (S) (circle one) Line of Section
2390 feet from (W) (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW (SW)
Lease Name: WAYMASTER Well #: 1
Field Name: Wildcat
Producing Formation: None
Elevation: Ground: 1791' Kelly Bushing: 1799'
Total Depth: 3350' Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 413 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.
(30sks In Rat Hole)(15sks In Mouse Hole)

Designate Type of Completion:

New Well Re-Entry Workover
 Oil SWD SLOW ENHR SIGW
 Dry Other (Core, WSW, Expl., Calc., etc.)

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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. _____

2/14/09 2/19/09 2/20/09
Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content 16,000 ppm Fluid volume 240 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: John O. Farmer III
Title: President Date: 4-17-09
Subscribed and sworn to before me this 17th day of April
20 09
Notary Public: Margaret A. Schulte
Date Commission Expires: _____

KCC Office Use ONLY
 Letter of Confidentiality Received
 If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

RECEIVED
APR 20 2009

KCC WICHITA

