ORIGINAL

LETION FORM

DES RIPTION OF WELL & LEASE

October 2008 Form Must Be Typed

WELL HISTORY

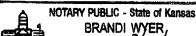
API No. 15 - 15-007-23420 000 OPERATOR: License # 5822 VAL ENERGY, INC Spot Description: __ Address 1: _200 W. DOUGLAS SW _NE _NE _SW Sec. 28 Twp. 34 S. R. 11 East West Address 2: SUITE 520 Feet from North / South Line of Section 2095 City: WICHITA _____ State: KS __ Zip: 67202 _ + ____ _____ Feet from ___ East / __ West_Line of Section Contact Person: K. TODD ALLAM Footages Calculated from Nearest Outside Section Corner: Phone: (316) 263-6688 □NE □NW □SE ☑SW County: BARBER CONTRACTOR: License # 5822 Lease Name: LB DIEL Name: VAL ENERGY, INC _____ Well #: __1-28 Wellsite Geologist: STEVE VAN BUSKIRK Field Name: UNKNOWN Producing Formation: MISSISSIPPIAN Purchaser: MACLASKEY Elevation: Ground: 1392 Designate Type of Completion: Kelly Bushing: _ ✓ New Well _____ Re-Entry Total Depth: 5140 Plug Back Total Depth: 4846 Amount of Surface Pipe Set and Cemented at: 288 ____ Gas ____ ENHR Multiple Stage Cementing Collar Used? Yes V No ___ CM (Coal Bed Methane) ____ Temp. Abd. If yes, show depth set: ____ ___ Dry ____ Other _ If Alternate II completion, cement circulated from: (Core, WSW, Expl., Cathodic, etc.) feet depth to:_ If Workover/Re-entry: Old Well Info as follows: Operator: ___ **Drilling Fluid Management Plan** (Data must be collected from the Reserve Pit) Well Name: _ Original Comp. Date: _____ Original Total Depth: ____ Chloride content: 28500 ppm Fluid volume: 900 bbls Deepening _____ Re-perf. ____ Conv. to Enhr. ____ Conv. to SWD Dewatering method used: HAULED Plug Back Total Depth _ Plug Back: ___ Location of fluid disposal if hauled offsite: Docket No.: ___ Commingled Operator Name: BEMCO __ Dual Completion Docket No.: Lease Name: COLE SWD License No.: 32613 __ Other (SWD or Enhr.?) Docket No.: ___ Quarter NW Sec. 25 Twp. 32 S. R. 12 East West 2/16/09 2/23/09 3/23/09 County: BARBER Spud Date or __ Docket No.: __D19886 Date Reached TD Completion Date or Recompletion Date Recompletion Date

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: Left Aller	,
Title: PRESIDENT Date: 5/12/09	Lette
Subscribed and sworn to before me this day of,	If Der
20_09	Wirel
Notary Public:	Geol
Date Commission Expires: 2/24/2010	OIC I

KCC Office Use ONLY er of Confidentiality Received nied, Yes 🗌 Date: __ line Log Received ogist Report Received KANSAS CORPORATION COMMISSION Distribution MAY 1 3 2009



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