

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

WELL COMPLETION FORM  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

*Jan my 6/26/09*

*02*

OPERATOR: License # 5144  
Name: Mull Drilling Company, Inc.  
Address 1: 1700 Waterfront Parkway, Bldg #1200  
Address 2: \_\_\_\_\_  
City: Wichita State: KS Zip: 67206 + 6637  
Contact Person: Mark Shreve  
Phone: ( 316 ) 264-6366  
CONTRACTOR: License # \_\_\_\_\_  
Name: \_\_\_\_\_  
Wellsite Geologist: \_\_\_\_\_  
Purchaser: \_\_\_\_\_

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.)*

RECEIVED  
JUN 25 2009

KCC WICHITA

If Workover/Re-entry: Old Well Info as follows:  
Operator: Mull Drilling Company, Inc.  
Well Name: HSS #1-22  
Original Comp. Date: 10/26/04 Original Total Depth: 4480'  
 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-30,418  
*Per w/ 6/16/09*  
Spud Date or Recompletion Date: \_\_\_\_\_ Date Reached TD: \_\_\_\_\_ Completion Date or Recompletion Date: 6/18/2009

API No. 15 - 135-24308-00-00  
Spot Description: \_\_\_\_\_  
SW SE SW SE Sec. 22 Twp. 16 S. R. 23  East  West  
200 Feet from  North /  South Line of Section  
1800 Feet from  East /  West Line of Section

Footages Calculated from Nearest Outside Section Corner:  
 NE  NW  SE  SW

County: Ness  
Lease Name: HSS Well #: 1-22  
Field Name: Osgood SE  
Producing Formation: Topeka  
Elevation: Ground: 2466' Kelly Bushing: 2475'  
Total Depth: 4480' Plug Back Total Depth: 4400'  
Amount of Surface Pipe Set and Cemented at: 241 Feet  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set: 1816' Feet  
If Alternate II completion, cement circulated from: 1816'  
feet depth to: surface w/ 185 *wo - log - 7/8/09* <sup>sq cmt.</sup>

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: \_\_\_\_\_  
Title: President/COO Date: 6/24/09

Subscribed and sworn to before me this 24 day of June  
20 09  
Notary Public: Tannis L. Tritt  
Date Commission Expires: March 26, 2011



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

Operator Name: Mull Drilling Company, Inc. Lease Name: HSS Well #: 1-22  
 Sec. 22 Twp. 16 S. R. 23  East  West County: Ness

**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 type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i>  Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No  Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i>  List All E. Logs Run: <b>On original ACO-1</b>	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample  Name Top Datum  On original ACO-1
--	--

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	12 1/4"	8 5/8"	24#	241'	common	150	2% gel, 3% cc
Production	7 7/8"	5 1/2"	14#	4479'	SMD/EA2	80/50	5% calseat

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose: <input type="checkbox"/> Perforate <input checked="" type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	Depth Top Bottom Surface-1816'	Type of Cement SMD	#Sacks Used 185	Type and Percent Additives

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth
4	3804'-3822', 3788'-3796' & 3776'-3782' CIBP set @ 4400' w/2 sks on top	1,000 gal 15% MCA + 1500 gal 15% NE	

TUBING RECORD: Size: <u>2 3/8"</u>	Set At: <u>3753'</u>	Packer At: <u>3753'</u>	Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr. Waiting on KCC approval before injecting		Producing Method: <input type="checkbox"/> Flowing <input 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: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input checked="" type="checkbox"/> Other (Specify) <u>SWD</u>	PRODUCTION INTERVAL: _____ _____
---	--	--

RECEIVED  
 JUN 25 2009  
 KCC WICHITA