

**ORIGINAL**

**WELL COMPLETION FORM**  
**WELL HISTORY - DESCRIPTION OF WELL & LEASE**

Operator: License # 32309  
Name: Presco Western, LLC  
Address 5665 FLATIRON PARKWAY  
City/State/Zip BOULDER CO 80301  
Purchaser: High Sierra Crude (oil)/BP (gas)  
Operator Contact Person: Randy M. Verret  
Phone ( 303 ) 305-1163  
Contractor: Name: Border Line, Inc  
License: 7840  
Wellsite Geologist: Not Applicable  
Designate Type of Completion

API NO. 15- 081-21106 0005  
County Haskell  
C - C - SW - SW Sec. 30 Twp. 30 S. R. 33  E  W  
660 Feet from SW (circle one) Line of Section  
660 Feet from EW (circle one) Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
(circle one) NE SE NW SW  
Lease Name SWLVLU Well # 5  
Field Name Victory  
Producing Formation Lansing  
Elevation: Ground 2,954' Kelley Bushing 2,965'

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

Total Depth 5,482' Plug Back Total Depth 4,300'  
Amount of Surface Pipe Set and Cemented at 1,885 Feet  
Multiple Stage Cementing Collar Used?      Yes   X   No  
If yes, show depth set      Feet  
If Alternate II completion, cement circulated from       
feet depth to      w/      sx cmt.

If Workover/Reentry: Old Well Info as follows:  
Operator: Presco Western, LLC  
Well Name: Grant Maurice 1-30  
Original Comp. Date 6/12/1997 Original Total Depth 5,482'  
     Deepening      Re-perf.      Conv. to Enhr./SWD  
  X   Plug Back 4,300' Plug Back Total Depth  
     Commingled Docket No.       
     Dual Completion Docket No.       
  X   Other (SWD or Enhr?) Docket No. 07-CONS-111-CUNI  
2/11/2009 6/26/2009  
Spud Date or Date Reached TD Completion Date or  
Recompletion Date Recompletion Date

Drilling Fluid Management Plan wo-log-7/26/09  
(Data must be collected from the Reserve Pit)  
Chloride content 1000 ppm Fluid volume 10 bbls  
Dewatering method used Air Evaporation  
Location of fluid disposal if hauled offsite:  
Operator Name       
Lease Name      License No.       
Quarter      Sec.      Twp.      S. R.       E  W  
County      Docket No.     

**RECEIVED**  
**JUL 24 2009**

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 on side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with this 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 [Signature]  
Title Regulatory Assistant Date 7/22/2009  
Subscribed and sworn to before me this 22nd day of July,  
20 09.  
Notary Public [Signature]  
Date Commission Expires 01/29/2013

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

Operator Name Presco Western, LLC Lease Name SWLVLU Well # 5  
 Sec. 30 Twp. 30 S.R. 33  East  West County Haskell

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem 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 during test. 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 (Attach Additional Sheets.) <input type="checkbox"/> Yes <input type="checkbox"/> No 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 (Submit Copy.) <input type="checkbox"/> Yes <input type="checkbox"/> No List All E.Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datums <input type="checkbox"/> Sample Name Top Datum
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CASING RECORD <input checked="" 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	1,888'	Prem	670/150	2%CC/1/4 Flocele
Production stg 1	7-7/8"	4-1/2"	10.5		Class H	360	7%Ea-2/.6%Halad
Production stg 2	7-7/8"	4-1/2"	10.5	10-3309'	Class C	300	2%CC/1/4 Flocele

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

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
	Set CIBP @ 5,280; 4,940; 4,300'		
4	4,146 - 4,166' (Lansing)	2000G 15% NeFe/ 17Bbl 4% KCl flush	
4	4,128 - 4,136' (Lansing)		
4	4,108 - 4,116' (Lansing)		

TUBING RECORD		Size <u>2-3/8"</u>	Set At <u>4,203'</u>	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr.			Producing Method		
Resumed - <u>7/11/2009</u>			<input type="checkbox"/> Flowing <input checked="" 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
	<u>4</u>	<u>-0-</u>	<u>234</u>	<u>-0-</u>	<u>40.5</u>

Disposition of Gas: **METHOD OF COMPLETION** Production Interval

Vented  Sold  Used on Lease  Open Hole  Perforation  Dually Comp.  Commingled  
 (If vented, submit ACO-18.)  Other (Specify) \_\_\_\_\_