

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: Trinidad Drilling
License: 33784
Wellsite Geologist: not applicable
Designate Type of Completion

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

If Workover/Reentry: Old Well Info as follows:

Operator: Presco Western, LLC
Well Name: SWLVLU P15
Original Comp. Date 11/15/2007 Original Total Depth 4,400'
 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. _____
4/28/2009 5/1/2009
Spud Date or Date Reached TD Completion Date or Recompletion Date

API NO. 15- 081-21735-0001
County Haskell

SE - SE - NW - NW Sec. 30 Twp. 30 S. R. 33 E W
1.113 Feet from S/N (circle one) Line of Section
1.007 Feet from E/W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW

Lease Name SWLVLU Well # 21
Field Name Haskell

Producing Formation Lansing

Elevation: Ground 2,952' Kelley Bushing 2,964'

Total Depth 4,400' Plug Back Total Depth _____

Amount of Surface Pipe Set and Cemented at 1,757 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 cm.

Drilling Fluid Management Plan WOB-DIG-7/27/09
(Data must be collected from the Reserve Pit)

Chloride content 4,300 ppm Fluid volume 1,500 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. _____

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 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 [Signature]

Title Regulatory Assistant Date 7/22/2009

Subscribed and sworn to before me this 22nd day of July, 2009.

Notary Public [Signature]

Date Commission Expires 01/29/2013

KCC Office Use ONLY
 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 # 21

Sec. 30 Twp. 30 S.R. 33 East West County Haske11

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 New 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"	24.0	1,757'	Lite	575	3%CC/1/4 Flo Seal
					Class C	150	3%CC
Production	7 7/8"	5 1/2"	15.5	4,400'	Lite	100	1/4 Flo Seal

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
4	4,110 - 4,120' (Lansing)	24 bbls acid/30 bbls flush	
4	4,132 - 4,136' (Lansing)	24 bbls acid/30 bbls flush	
4	4,150 - 4,162' (Lansing)	2000G NEFE acid/24 bbls 4% KCL	

TUBING RECORD		Size <u>2 7/8"</u>	Set At <u>4,037'</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 Production, test from 5/13/2009		<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
	9	-0-	50	-0-	37.5

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) _____