

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
October 2008
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 33036

Name: Strata Exploration, Inc.

Address 1: PO Box 401

Address 2: 201 NE 7th St

City: Fairfield State: IL Zip: 62837 + 0401

Contact Person: John R. Kinney

Phone: (618) 842-2610

CONTRACTOR: License # 5142

Name: Sterling Drilling Company

Wellsite Geologist: Jon Christensen

Purchaser: MV Purchasing/Oneok

Designate Type of Completion:

New Well Re-Entry Workover

Oil SWD SIOW

Gas ENHR SIGW

CM (Coal Bed Methane) Temp. Abd.

Dry Other

(Core, WSW, Expl., Cathodic, etc.)

If Workover/Re-entry: Old Well Info as follows:

Operator: _____

Well Name: _____

Original Comp. Date: _____ Original Total Depth: _____

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.: _____

4/10/2009 4/20/2009 5/27/2009

Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

API No. 15 - 097216530000

Spot Description: _____

SE NE NW NE Sec. 4 Twp. 28 S. R. 18 East West

516 Feet from North / South Line of Section

1568 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE NW SE SW

County: Kiowa

Lease Name: Einsel Well #: A 1-4

Field Name: Unnamed

Producing Formation: Mississippian

Elevation: Ground: 2194 Kelly Bushing: 2207

Total Depth: 5000 Plug Back Total Depth: 4998

Amount of Surface Pipe Set and Cemented at: 522 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.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 5500 ppm Fluid volume: 1800 bbls

Dewatering method used: Hauled free fluids to SWD/ Evaporation

Location of fluid disposal if hauled offsite:

Operator Name: Roberts Resources

Lease Name: Mary SWD License No.: 32781

Quarter NE Sec. 16 Twp. 29 S. R. 18 East West

County: Kiowa Docket No.: D28396

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 R. Kinney

Title: President Date: 7/3/2009

Subscribed and sworn to before me this 3 day of July

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Notary Public: Teresa Courtright

OFFICIAL SEAL
TERESA COURTRIGHT
Notary Public, State of Illinois
My Commission Expires: 4/24/2012

KCC Office Use ONLY

Letter of Confidentiality Received

If Denied, Yes Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution