

ORIGINAL

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form ACO-1  
October 2008  
Form Must Be Typed

WELL COMPLETION FORM  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 33712  
Name: Clark Energy LLC  
Address 1: 1198 Road 31  
Address 2: \_\_\_\_\_  
City: Havana State: KS Zip: 67347 + \_\_\_\_\_  
Contact Person: Randy Clark  
Phone: ( 620 ) 330-2110

CONTRACTOR: License # OWAWO  
Name: \_\_\_\_\_  
Wellsite Geologist: \_\_\_\_\_

Purchaser: \_\_\_\_\_  
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.)*

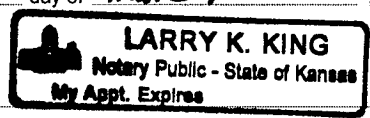
If Workover/Re-entry: Old Well Info as follows:  
Operator: B. G. Oils Inc  
Well Name: Blake # 1  
Original Comp. Date: \_\_\_\_\_ Original Total Depth: N/A  
\_\_\_\_\_ Deepening  Re-perf.  Conv. to Enhr. \_\_\_\_\_ Conv. to SWD  
\_\_\_\_\_ Plug Back: \_\_\_\_\_ Plug Back Total Depth  
\_\_\_\_\_ Commingled \_\_\_\_\_ Docket No.: \_\_\_\_\_  
\_\_\_\_\_ Dual Completion \_\_\_\_\_ Docket No.: \_\_\_\_\_  
\_\_\_\_\_ Other (SWD or Enhr.?) \_\_\_\_\_ Docket No.: \_\_\_\_\_  
10-18-07 11-12-07  
Spud Date or \_\_\_\_\_ Date Reached TD \_\_\_\_\_ Completion Date or  
Recompletion Date \_\_\_\_\_ Recompletion Date \_\_\_\_\_

API No. 15 - 019-23473 <sup>23382-0002</sup> *JK*  
Spot Description: \_\_\_\_\_  
~~NE~~ NE NE NE Sec. 15 Twp. 33 S. R. 13  East  West  
4830 Feet from  North /  South Line of Section  
200 Feet from  East /  West Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
 NE  NW  SE  SW  
County: Chautauqua  
Lease Name: Blake Well #: 1  
Field Name: Fraiser  
Producing Formation: Hushpuckney  
Elevation: Ground: 841 Kelly Bushing: N/A  
Total Depth: 1863 Plug Back Total Depth: 1863  
Amount of Surface Pipe Set and Cemented at: N/A Feet  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set: N/A Feet  
If Alternate II completion, cement circulated from: N/A  
feet depth to: N/A w/ N/A sx cmt.

Drilling Fluid Management Plan OWAWO - Alt II NCR  
*(Data must be collected from the Reserve Pit)* 9-4-09  
Chloride content: N/A ppm Fluid volume: N/A bbls  
Dewatering method used: \_\_\_\_\_  
Location of fluid disposal if hauled offsite: \_\_\_\_\_  
Operator Name: N/A  
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: Randy W. Clark  
Title: Manager Date: 3-27-09  
Subscribed and sworn to before me this 27<sup>th</sup> day of March  
20 09  
Notary Public: Larry K. King  
Date Commission Expires: 04-02-2013



**KCC Office Use ONLY**  
 Letter of Confidentiality Received  
 If Denied, Yes  Date: \_\_\_\_\_  
 Wireline Log Received  
 Geologist Report Received  
 UIC Distribution *(TV)*  
**RECEIVED**  
**JUN 08 2009**

KCC WICHITA

Operator Name: Clark Energy LLC Lease Name: Blake Well #: 1  
 Sec. 15 Twp. 33 S. R. 13  East  West County: Chautauqua

**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 checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i>  Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i>  List All E. Logs Run: <u>G/N log</u>	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample  <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Altamont Limestone</td> <td>844</td> <td>+3</td> </tr> <tr> <td>Pawnee Limestone</td> <td>996</td> <td>-155</td> </tr> <tr> <td>Oswego Limestone</td> <td>1088</td> <td>-247</td> </tr> <tr> <td>Mississippi</td> <td>1526</td> <td>-685</td> </tr> </table>	Name	Top	Datum	Altamont Limestone	844	+3	Pawnee Limestone	996	-155	Oswego Limestone	1088	-247	Mississippi	1526	-685
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Pawnee Limestone	996	-155														
Oswego Limestone	1088	-247														
Mississippi	1526	-685														

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
<u>Casing</u>	<u>N/A</u>	<u>4.5</u>	<u>N/A</u>	<u>N/A</u>	<u>N/A</u>	<u>N/A</u>	<u>N/A</u>

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
<u>2</u>	<u>678-684</u>	<u>300 gal. 15% Hcl and 400 bbl water w/ 8000 lbs sand</u>	

TUBING RECORD: Size: <u>2 3/8</u> Set At: <u>750</u> Packer At: <u>N/A</u>		Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr. <u>12-28-07</u>	Producing Method: <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. <u>0</u>	Gas Mcf <u> </u> Water Bbls. <u>120</u> Gas-Oil Ratio <u> </u> Gravity <u> </u>

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input checked="" 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 checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: <u>678-684</u>
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Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

RECEIVED  
 AUG 10 2009  
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 JUN 08 2009  
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