

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
October 2008
Form Must Be Typed

10/14/09

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 5822
Name: VAL ENERGY INC
Address 1: 200 W DOUGLAS SUITE 520
Address 2: _____
City: WICHITA State: KS Zip: 67202 + _____
Contact Person: K. TODD ALLAM
Phone: (316) 263-6688
CONTRACTOR: License # 5822
Name: VAL ENERGY
Wellsite Geologist: ZEB STEWART
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: _____
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.: _____
9/8/2009 9/16/2009 10/5/2009
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 007-23451-00-00
Spot Description: SW-SW-NW
SW SW NW Sec. 32 Twp. 34S S. R. 11 ☐ East ☒ West
3070 Feet from ☐ North / ☒ South Line of Section
4950 Feet from ☒ East / ☐ West Line of Section

Footages Calculated from Nearest Outside Section Corner:

☐ NE ☐ NW ☒ SE ☐ SW

County: BARBER
Lease Name: ROSE TRUST Well #: 2-32A
Field Name: UNKNOWN

Producing Formation: _____
Elevation: Ground: 1374 Kelly Bushing: 1385
Total Depth: 6072 Plug Back Total Depth: 6072
Amount of Surface Pipe Set and Cemented at: 207 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

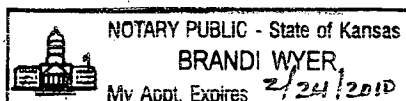
(Data must be collected from the Reserve Pit)

Chloride content: 27000 ppm Fluid volume: 800 bbls
Dewatering method used: HAULED OFF
Location of fluid disposal if hauled offsite: _____
Operator Name: VAL ENERGY INC
Lease Name: PAXTON-KUBIK SWD License No.: 5822
Quarter NW Sec. 28 Twp. 34 S. R. 11 ☐ East ☒ West
County: BARBER Docket No.: D30309

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: [Signature]
Title: AGENT Date: 10/1/2009
Subscribed and sworn to before me this 1 day of OCTOBER
20 09
Notary Public: [Signature]
Date Commission Expires: 2/24/2010



KCC Office Use ONLY	
<input checked="" type="checkbox"/>	Letter of Confidentiality Received
<input checked="" type="checkbox"/>	If Denied, Yes <input type="checkbox"/> Date: _____
<input checked="" type="checkbox"/>	Wireline Log Received
<input checked="" type="checkbox"/>	Geologist Report Received
<input type="checkbox"/>	UIC Distribution

RECEIVED
OCT 12 2009

KCC WICHITA