

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

8/21/09
ORIGINAL

OPERATOR: License # 33168

Name: WOOLSEY OPERATING COMPANY, LLC

Address 1: 125 N. MARKET

Address 2: SUITE 1000

City: WICHITA State: KS Zip: 67202 + 1 7 2 9

Contact Person: DEAN PATTISSON, OPERATIONS MANAGER

Phone: (316) 267-4379 (ext 107)

CONTRACTOR: License # 30606

Name: MURFIN DRILLING COMPANY, INC.

Wellsite Geologist: BILLY G. KLAVER

Purchaser: BLUESTEM GAS MARKETING / PLAINS MARKETING

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.)

KCC
AUG 21 2009
CONFIDENTIAL

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.: _____

04-23-2009 05-01-2009 05-22-2009

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

API No. 15 - 007-23425 00 00

Spot Description: 145' N & 95' E of C NW SW

SW NE NW SW Sec. 6 Twp. 34 S. R. 10 East West

2125 Feet from North / South Line of Section

755 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: BARBER

Lease Name: JAHAY A Well #: 1

Field Name: KOCHIA

Producing Formation: MISSISSIPPIAN

Elevation: Ground: 1418 Kelly Bushing: 1429

Total Depth: 5150 Plug Back Total Depth: 4973

Amount of Surface Pipe Set and Cemented at: 222 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: 12,500 ppm Fluid volume: 1800 bbls

Dewatering method used: Haul free fluids and allow to dry

Location of fluid disposal if hauled offsite:

Operator Name: WOOLSEY OPERATING COMPANY, LLC

Lease Name: HARBAUGH 2 OWWO License No.: 33168

Quarter _____ Sec. 32 Twp. 33 S. R. 11 East West

County: BARBER Docket No.: D - 30,333

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: _____

Title: Dean Pattison, Operations Manager Date: 08-21-2009

Subscribed and sworn to before me this 21st day of August

20 09

Notary Public: Debra K. Clingan

Date Commission Expires: March 27, 2010

KCC Office Use ONLY

- Letter of Confidentiality Received
- If Denied, Yes Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution

RECEIVED
AUG 21 2009

DEBRA K. CLINGAN
NOTARY PUBLIC
STATE OF KANSAS
My Exp. 3-27-10

KCC WICHITA