

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
October 2008
Form Must Be Typed

10/9/11

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 32294
Name: Osborn Energy, L.L.C.
Address 1: 24850 Farley
Address 2: _____
City: Bucyrus State: KS Zip: 66013
Contact Person: Curstin Hamblin
Phone: (913) 533-9900
CONTRACTOR: License # 32294
Name: Osborn Energy, L.L.C.
Wellsite Geologist: Curstin Hamblin
Purchaser: Akawa Natural Gas, L.L.C.

API No. 15 - ⁰⁹¹~~121~~ 23332-0000
Spot Description: NW4 Sec. 7 T15S R25E
S2 NW Sec. 7 Twp. 15 S. R. 25 East West
3300 Feet from North / South Line of Section
3960 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Johnson
Lease Name: Metcalf Partners Well #: 6-7
Field Name: Stilwell
Producing Formation: Marmaton
Elevation: Ground: 1048 Kelly Bushing: _____
Total Depth: 705 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 24.80 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: 695.33
feet depth to: surface w/ 95 ^{sx cmt} AKZ-Dig-10/11/09

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.: _____
9/2/2009 9/3/2009 10/5/2009
Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content: _____ ppm Fluid volume: _____ bbls
Dewatering method used: _____
Location of fluid disposal if hauled offsite: _____
Operator Name: _____
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: Curstin Hamblin
Title: Geologist Date: 10.9.09
Subscribed and sworn to before me this 09 day of October
20 09
Notary Public: Jane Brewer
Date Commission Expires: _____

Jane Brewer
Notary Public
State of Kansas
My Commission Expires 3/23/11

KCC Office Use ONLY
 Letter of Confidentiality Received
 If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
RECEIVED
OCT 15 2009

KCC WICHITA