

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

AMENDED
1/10/09

Operator: License # 33476
Name: FIML Natural Resources, LLC
Address: 410 17th Street Ste. 900
City/State/Zip: Denver, CO. 80202
Purchaser: NA
Operator Contact Person: Cassandra Parks
Phone: (303) 893-5090
Contractor: Name: Murfin Drilling Company
License: 30606
Wellsite Geologist: _____

Designate Type of Completion:
____ New Well ____ Re-Entry ~~Workover~~
____ Oil SWD ____ SIOW ____ Temp. Abd.
____ Gas: ____ ENHR ____ SIGW
____ Dry ____ Other (Core, WSW, Expl., Cathodic, etc)

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

Operator: _____
Well Name: _____
Original Comp. Date: NA Original Total Depth: 4758'
____ Deepening ____ Re-perf. ____ Conv. to Enhr./SWD
____ Plug Back ____ Plug Back Total Depth
____ Commingled Docket No. _____
____ Dual Completion Docket No. _____
 Other (SWD or Enhr.?) Docket No. D-30,096

<u>9/17/2007</u>	<u>9/26/2007</u>	<u>3/6/2008</u>
Spud Date or Recompletion' Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 171-20666-0001-0000
County: Scott
____ NW ____ NE ____ SW Sec. 4 Twp. 19 S. R. 31 ~~East~~ West
2310 feet from (S) N (circle one) Line of Section
1485 feet from E / (W) (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Pfeifer-Ball Well #: 11B-4-1931
Field Name: Not named
Producing Formation: NA
Elevation: Ground: 2958' Kelly Bushing: 2972'
Total Depth: 4758' Plug Back Total Depth: 2260'
Amount of Surface Pipe Set and Cemented at 9 jts @ 403 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set 2989 Feet
If Alternate II completion, cement circulated from 2989' (DV tool)
feet depth to surface w/ 465 sx cmt.
APR 2 - Dig - 10/9/08

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: [Signature]
Title: Regulatory Specialist Date: 4/3/2008
Subscribed and sworn to before me this 3 day of April
20 08
Notary Public: [Signature]
Date Commission Expires: 7-1-2010



KCC Office Use ONLY

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

RECEIVED
KANSAS CORPORATION COMMISSION
APR 04 2008

Operator Name: FIML Natural Resources, LLC Lease Name: Pfeifer-Ball Well #: 11B-4-1931
 Sec. 4 Twp. 19 S. R. 31 East West County: Scott

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 type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input 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: Spectral Density/Dual Spaced Neutron; Array Compensated Resistivity (already sent to KCC)	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum Cedar Hills 1793' 1179'
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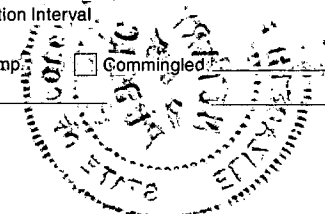
CASING RECORD <input checked="" type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
Surface	12-1/4	8-5/8"	24.0	403	A common	255	3% CaCl & 2% gel
Production	7-7/8"	5-1/2"	15.5	4748	ASC	300	2%gel, 10% salt, 0.5 pps flo
					Light	465	0.25 ppg Flo & 5.0 ppg Gil

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
	CIBP @ 4550'	1 sx cmt	4550
	CIBP @ 4190'	1 sx cmt	4190
	CIBP @ 2260'	1 sx cmt	2260'
2	1910-1962'		1910-1962'

TUBING RECORD		Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		2-7/8"	1894'	1894'		
Date of First, Resumerd Production, SWD or Enhr. No water has been disposed of yet			Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)			
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity	

Disposition of Gas	METHOD OF COMPLETION	Production Interval
<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify)	



CASING MECHANICAL INTEGRITY TEST

DOCKET # D-30096

Disposal Enhanced Recovery:

NE NE SW, Sec 4, T 19 S, R 31 W

Repressuring
Flood
Tertiary

2310 Feet from South Section Line
3795 Feet from East Section Line

Date injection started _____
API #15 -171 -206660000

Lease Pfeifer-Ball Well # 11B-4-1931
County Scott

Operator: FIML Natural Resources Operator License # 33476

Name & Address 410 17th Street
Denver, CO 80202

Contact Person Eddie Swan
Phone 303 893-5090

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Max. Auth. Injection Press. _____ psi; Max. Inj. Rate _____ bbl/d;
If Dual Completion - Injection above production _____ Injection below production _____

Size	Conductor	Surface	Production	Liner	Size	Tubing
Set at		<u>8 7/8</u>	<u>5 1/2</u>		<u>2 1/8</u>	
Cement Top		<u>403</u>	<u>4748</u>		Set at	<u>1894</u>
Bottom		<u>0</u>	<u>0</u>		Type	<u>Sealrite</u>
Perf.	<u>2989 to 0 w/ 765 SK</u>	<u>403</u>	<u>4748</u>			
Packer type	<u>AD-1</u>			<u>4758 (22600BPP)</u>	ft. depth	<u>1894</u>
Zone of injection	<u>Cedar Hills</u>	ft. to ft.	<u>1910-1962</u>	Perf. or open hole		<u>Perf</u>

Type Mit: Pressure Radioactive Tracer Survey Temperature Survey

Time: Start 0 Min. 15 Min. 30 Min.

Pressures	300	300	300	Set up 1	System Pres. during test
				Set up 2	Annular Pres. during test <u>300</u>
				Set up 3	Fluid loss during test <u>0</u> bbls.

Tested: Casing or Casing - Tubing Annulus

The bottom of the tested zone is shut in with a packer

Test Date 3/6/08 Using Walker Tank Service Company's Equipment

The operator hereby certifies that the zone between 0 feet and 1894 feet was the zone tested

E J Plummer
Signature Title

The results were Satisfactory , Marginal _____, Not Satisfactory _____

ate Agent Ken Khlík Title PIRT II Witness: Yes No _____

MARKS: Initial test on newly converted well. Retest in 5 years

Origin. Conservation Div.; KCB/T; Dist. Office;

Computer Update
GPS 38.43079°N
100.75387°W

GPS entered

COPY

KCC Form U-7 6/84
RECEIVED
KANSAS CORPORATION COMMISSION

APR 04 2008

CONSERVATION DIVISION
WICHITA, KS

RECEIVED
MAR 24 2008

CHEYENNE WELL SERVICE

P.O. Box 384

Phone 785-798-2282

NESS CITY, KANSAS 67560

No. 29870

Company FMH Natural Resources LLC 3-4, 5+6 2008
Lease Phifer-Ball Well No. 11B-4-1831 Scott Co

JTS.	PULLED FROM WELL	EQUIPMENT	JTS.	RAN IN WELL	
		POLISHED ROD		CONFIDENTIAL	
		RODS			
		PONY RODS			
		PUMP			
		TUBING	57		2 1/2" Seal + 1/4"
		TUBING SUBS			
		BARREL			
		ANCHOR			

RECORD OR ROD BREAKS

New () USED ()

SIZE & TYPE OF ROD	KIND OF BREAK	NO. OF RODS DEEP	SIZE & TYPE REPLACEMENT

RECORD OF TUBING FAILURE

Found Hole () Split () Collar Leak () In. Jt. () Length ()
Replaced With New () B Grade () Size _____ Length ()

Visual Condition of:		SIZE	GOOD	MILDLY PITTED	BADLY PITTED	CHECK IF PRESENT	
						SCALE	PARAFFIN
Rods							
Rods							
Tubing							

3-4 Remarks Drive to loc. Rig up ... Fluid level. Home (3hr)

3-5 Drive to loc. Rig up wire line & set plug @ 4550'
+ @ 4190 w/ 15x cement on each plug. Top plug @ 2260'
+ test. Start swabbing. Home. (11hr)

3-6 Drive to loc. Continue swabbing. sand fill up. Tally
tally & run pack to 1894'. Pump 20 bbl treated wtr. Set
pack. Test backside. Good. Rig off. (8hr)

	HRS.	PER HRS.	AMOUNT
UNIT #23	22	190.00	4180.00
OPERATOR			
FLOOR HANDS			
SWAB CUPS			
NO. USED			
TYPE			
OIL SAVER RUBBERS			
SAND PUMP			
TONGS X			
POWER SUB			
REVERSE CIRCULATOR			
DRILLING HEAD			
DRILLING HEAD RUBBER			
DIESEL FUEL and PAINT			
PLEASE PAY BY INVOICE			
NO STATEMENT WILL BE SENT			
			42.94
			20.00
			275.78
			4643.12

Approved by E. L. [Signature] Edwin [Signature]
Comp. AFE 8210-324