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KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
October 2008
Form Must Be Typed

12/08/11

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 32309
Name: Presco Western, LLC
Address 1: 5665 Flatiron Parkway
Address 2: _____
City: Boulder State: CO Zip: 80301 + _____
Contact Person: Susan Sears
Phone: (303) 444-8881
CONTRACTOR: License # 33784
Name: Trinidad Drilling
Wellsite Geologist: N/A
Purchaser: N/A

Designate Type of Completion:
 New Well _____ Re-Entry _____
_____ Oil _____ SWD _____ SIOW _____
_____ Gas _____ ENHR _____ SIGW _____
_____ CM (Coal Bed Methane) _____ Temp. Abd. _____
 Dry _____ Other _____
(Core, WSW, Expl., Cathodic, etc.)

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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.: _____
09/28/09 10/06/09 10/07/09
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 067-21696-0000
Spot Description: _____
NE SE NW NW Sec. 19 Twp. 30 S. R. 38 East West
919 Feet from North / South Line of Section
1036 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Grant
Lease Name: Lewis Well #: 6-D19-30-38
Field Name: _____
Producing Formation: None
Elevation: Ground: 3150' Kelly Bushing: 3161'
Total Depth: 5900' Plug Back Total Depth: N/A
Amount of Surface Pipe Set and Cemented at: 1743 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: 3600 ppm Fluid volume: 1800 bbls
Dewatering method used: Air Evaporation
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: Susan Sears
Title: Susan Sears - KS Engineering Manager Date: 12-10-09
Subscribed and sworn to before me this 10th day of December
20 09
Notary Public: Sandra Blackburn
Date Commission Expires: 01/29/2013

KCC Office Use ONLY
 Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received
_____ Geologist Report Received
_____ UIC Distribution
RECEIVED
DEC 14 2009

KCC WICHITA