

* Rec'd ACOI w/ 4-5
 Form to Commence Inject.
 Sent orig to UIC (SD) 3/24/09
 Form ACO-1
 October 2008
 Form Must Be Typed

KANSAS CORPORATION COMMISSION
 OIL & GAS CONSERVATION DIVISION

WELL COMPLETION FORM
 WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 32628
 Name: Quantum Operating Company
 Address 1: PO Box 3029
 Address 2: _____
 City: Denver State: CO Zip: 80201 + _____
 Contact Person: EUGENE NICHOLS

Phone: (720) 488 - 4942
 CONTRACTOR: License # _____
 Name: _____
 Wellsite Geologist: _____

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: Vera Cruz Petroleum - originally drilled
 Well Name: Atherton No. 7
 Original Comp. Date: 12-1-79 Original Total Depth: 3558
 _____ 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.: E 28,624 - 0001
2-6-2006 _____ 2-6-2006
 Spud Date or _____ Date Reached TD _____ Completion Date or
 Recompletion Date _____ Recompletion Date

API No. 15 - 039 - 20471-0001
 Spot Description: C N/2 SW
NE-NW-SW Sec. 5 Twp. 1 S. R. 26 East West
2075 Feet from North / South Line of Section
4056 Feet from East / West Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW

County: DECATUR
 Lease Name: Atherton Well #: 7
 Field Name: BLEES
 Producing Formation: Lansing Kansas City
 Elevation: Ground: 2471 Kelly Bushing: 2475
 Total Depth: 3558 Plug Back Total Depth: 3227
 Amount of Surface Pipe Set and Cemented at: 275 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 WONJ 12-1809
 (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: _____
 Title: PRESIDENT Date: 3-18-2009
 Subscribed and sworn to before me this 16th day of March,
20 09.
 Notary Public: Rebecca Brown
 Date Commission Expires: 4/23/2012

KCC Office Use ONLY

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

Operator Name: Quantum Operating Company Lease Name: Atherton Well #: 7
 Sec. _____ Twp. _____ S. R. _____ East West County: DECATUR

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 type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: | <input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum |
|--|---|

| CASING RECORD <input 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 |
| <i>SWAP.</i> | | 8 5/8 | 30 | 275 | | 225 | |
| <i>PROD.</i> | | 4 1/2 | 9.5 | 3551 | | 150 | |

Handwritten notes

| 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 |
|----------------|--|--|-------|
| | Original OH 3551-58 | | |
| | Now perf 3248-50 and 3288 -90 | | |

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KANSAS CORPORATION COMMISSION
MAR 23 2009
CONSERVATION DIVISION
WICHITA, KS

| | | |
|--|---|---|
| TUBING RECORD: Size: <u>2 3/8</u> Set At: <u>3194</u> Packer At: <u>3194</u> | | Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Date of First, Resumed Production, SWD or Enhr. <u>4 - 15 - 2006 Enhr, inj 150 BWPD</u> | Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input checked="" type="checkbox"/> Other (Explain) | |
| Estimated Production Per 24 Hours | Oil Bbls. | Gas Mcf |
| | Water Bbls. | Gas-Oil Ratio |
| | | Gravity |

| | | |
|---|--|--|
| DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i> | METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____ | PRODUCTION INTERVAL: _____ _____ |
|---|--|--|