

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
October 2008
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

11/17/09

OPERATOR: License # 6569
Name: Carmen Schmitt, Inc
Address 1: P.O. Box 47
Address 2: 915 Harrison
City: Great Bend State: KS Zip: 67530 + 0 0 4 7
Contact Person: Carmen Schmitt, Inc
Phone: (620) 793-5100

CONTRACTOR: License # 33935
Name: HD Drilling

Wellsite Geologist: Thomas J. Funk NOV 17 2009

Purchaser: N/A

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.: _____

10/19/09 10/29/09 RA 10/29/09
Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 171-20733-00-00

Spot Description: _____

_____ NW SE NE Sec. 35 Twp. 19 S. R. 31 East West

1650 Feet from North / South Line of Section

990 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE NW SE SW

County: Scott

Lease Name: Elinor Well #: 1

Field Name: Wildcat

Producing Formation: N/A

Elevation: Ground: 2957 Kelly Bushing: 2967

Total Depth: 4723 Plug Back Total Depth: 4723

Amount of Surface Pipe Set and Cemented at: 225 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: 10000 ppm Fluid volume: 600 bbls

Dewatering method used: Evaporate

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.

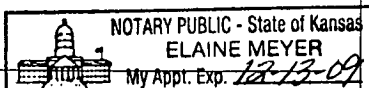
Signature: Francis Hiteckmann

Title: Operations Manager Date: 11/17/09

Subscribed and sworn to before me this 17th day of November

20 09.

Notary Public: Elaine Meyer



Date Commission Expires: 12-13-09

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

RECEIVED
KANSAS CORPORATION COMMISSION

NOV 19 2009

CONSERVATION DIVISION
WICHITA, KS