

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 33491Name: King Oil OperationsAddress 1: 696 D. Fairground Rd.

Address 2: _____

City: Ellis State: KS Zip: 67637 + _____Contact Person: Rodney L. KingPhone: (785) 726-3498 or Cell (785) 259-3038CONTRACTOR: License # 32128RECEIVED
KANSAS CORPORATION COMMISSIONName: Western Well ServiceWellsite Geologist: Clifford Ottaway

JAN 25 2010

Purchaser: _____

Designate Type of Completion: CONSERVATION DIVISION
WICHITA, KS 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: Rodney KingWell Name: King #2Original Comp. Date: 9-15-2009 Original Total Depth: 3936 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: _____8-25-2009 8-26-2009 8-26-2009

Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 051-25817-000001Spot Description: 1,010 FNL & 1,050 FELSW NE NE Sec. 35 Twp. 12 S. R. 20 East West1,010 Feet from North / South Line of Section1,050 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

 NE NW SE SWCounty: EllisLease Name: King Well #: 2Field Name: WiesnerProducing Formation: ConglomerateElevation: Ground: 2170 Kelly Bushing: 2175Total Depth: 3936 Plug Back Total Depth: 3935Amount of Surface Pipe Set and Cemented at: 224 FeetMultiple Stage Cementing Collar Used? Yes NoIf yes, show depth set: Cemented Bottom to Top FeetIf Alternate II completion, cement circulated from: 3935feet depth to: surface w/ 460 sx cmt. WD-Dlg-1210

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: N/A ppm Fluid volume: N/A bblsDewatering method used: 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: Rodney L. King
Title: Operator Date: 1-21-10

Subscribed and sworn to before me this 22nd day of January, 2010.

Notary Public: Sandra A. Wade

Date Commission Expires: 10/16/2012

 Notary Public - State of Kansas
My Appt. Expires 10/16/2012

KCC Office Use ONLY

Letter of Confidentiality Received
If Denied, Yes Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

Operator Name: King Oil Operations Lease Name: King Well #: 2
 Sec. 35 Twp. 12 S. R. 20 East West County: Ellis

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 (Attach Additional Sheets)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Log Formation (Top), Depth and Datum	<input checked="" type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Datum
Electric Log Run (Submit Copy)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	LKC	3483
List All E. Logs Run:		ARB	-1307
			3855
			-1675

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	23	224	Common	165	
Long String	7 7/8	5 1/2	15.50	3935	Smd	460	

ADDITIONAL CEMENTING / SQUEEZE RECORD

Purpose: <input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives

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
4	3824-3832	None	
		RECEIVED KANSAS CORPORATION COMMISSION	
		JAN 25 2010	
		CONSERVATION DIVISION WICHITA, KS	

TUBING RECORD: Size: Set At: Packer At:			Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2 7/8 3899			
Date of First, Resumed Production, SWD or Enhr. <u>8-26-2009</u>		Producing Method: <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)	
Estimated Production Per 24 Hours	Oil Bbls. <u>65</u>	Gas Mcf <u>none</u>	Water Bbls. <u>2.6</u> Gas-Oil Ratio Gravity

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