

ORIGINAL

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
October 2008
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

1109/12

OPERATOR: License # 33036
Name: Strata Exploration, Inc.
Address 1: PO Box 401
Address 2: _____
City: Fairfield State: IL Zip: 62837 + 0401
Contact Person: John R. Kinney
Phone: (618) 842-2610
CONTRACTOR: License # 5142
Name: Sterling Drilling Company
Wellsite Geologist: Jon Christensen
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.: _____
11/09/2009 11/18/2009 11/18/2009
Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 15-097-21666-00-00
Spot Description: _____
N2E NW SE Sec. 4 Twp. 28 S. R. 18 East West
2342 Feet from North / South Line of Section
1650 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Kiowa
Lease Name: Nace Well #: 1-4
Field Name: Greensburg SW
Producing Formation: N/A
Elevation: Ground: 2217 Kelly Bushing: 2226
Total Depth: 4950 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 522 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: 12000 ppm Fluid volume: 1500 bbls
Dewatering method used: Haul off free fluids / Evaporation
Location of fluid disposal if hauled offsite:
Operator Name: Roberts Resources
Lease Name: MARY License No.: 32781
Quarter _____ Sec. 16 Twp. 29 S. R. 18 East West
County: Kiowa Docket No.: D 28396

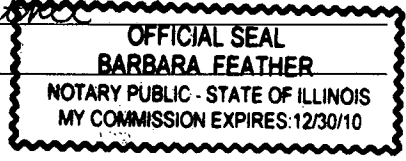
INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side 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: John R. Kinney
Title: President Date: 01/04/2010

Subscribed and sworn to before me this 4th day of January, 2010.

Notary Public: Barbara Feather
Date Commission Expires: 12-30-2010



KCC Office Use ONLY
 Letter of Confidentiality Received
 If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
RECEIVED
JAN 11 2010

KCC WICHITA