

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

01/08/11

OPERATOR: License # 34258⁴⁴
Name: Cortez Heartland, LLC
Address 1: 3131 McKinney Ave. Suite 430
Address 2: _____
City: Dallas State: Tx Zip: 75204 + _____
Contact Person: Mike Catrino
Phone: (214) 628-9155
CONTRACTOR: License # 5929
Name: Duke Drilling
Wellsite Geologist: _____
Purchaser: _____

API No. 15 - 145-21591-00-00
Spot Description: _____
_____ NW NE Sec. 5 Twp. 21 S. R. 19 East West
660 Feet from North / South Line of Section
1980 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Rush PAWNEE
Lease Name: Smith Well #: 1-5
Field Name: _____

Producing Formation: Mississippian
Elevation: Ground: 2160 Kelly Bushing: 2173
Total Depth: 4400 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 435 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.

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.)

For file on 01/13/11
1st copy

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.: _____
9-12-09 9-18-09
Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content: _____ ppm Fluid volume: _____ 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: [Signature]
Title: Geologist Date: 1/6/10
Subscribed and sworn to before me this 6TH day of JANUARY
20 10
Notary Public: Janise K. Bright
Date Commission Expires: 03-26-13

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

JANISE K. BRIGHT
NOTARY PUBLIC
STATE OF KANSAS
My Appl. Exp. _____

RECEIVED
JAN 08 2010
KCC WICHITA