

* Re-entry

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

01/12/12

OPERATOR: License # 32294
Name: Osborn Energy, L.L.C.
Address 1: 24850 Farley
Address 2: _____
City: Bucyrus State: KS Zip: 66013 + _____
Contact Person: Curstin Hamblin
Phone: (913) 533-9900
CONTRACTOR: License # 32294
Name: Osborn Energy, L.L.C.
Wellsite Geologist: Curstin Hamblin
Purchaser: Akawa Natural Gas, L.L.C.
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.)

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KCC

API No. 15 - 121-28676-0000
Spot Description: NE4 of Sec. 21 T16S R25E
____ NW ____ SW ____ NE Sec. 21 Twp. 16 S. R. 25 East West
3630 Feet from North / South Line of Section
2310 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Miami
Lease Name: Divine Well #: 1-21
Field Name: Louisburg
Producing Formation: Marmaton
Elevation: Ground: 1037 Kelly Bushing: _____
Total Depth: 678 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 25.15 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: 629.14
feet depth to: surface w/ 95 sx cmt.

If Workover/Re-entry: Old Well Info as follows:

Operator: Osborn Energy, L.L.C.
Well Name: Divine 1-21
Original Comp. Date: 7/27/2009 Original Total Depth: 678
____ 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.: _____
12/22/2009 12/29/2009
Spud Date or 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: _____
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: Curstin Hamblin
Title: Geologist Date: 1-12-10
Subscribed and sworn to before me this 12th day of January

20 10
Notary Public: Jane Brewer
Date Commission Expires: _____
Jane Brewer
Notary Public
State of Kansas
My Commission Expires 3-23-11

KCC Office Use ONLY
 Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received
____ Geologist Report Received
____ UIC Distribution
RECEIVED
JAN 14 2010
KCC WICHITA