CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
October 2008
Form Must Be Typed
1/4/12

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

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: MV Purchasing/Oneok

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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.:

10/28/2009	11/7/2009	01/20/2010
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-097-21665-00-00
Spot Description:
__ - __ - __ - SE Sec. 33 Twp. 27 S. R. 18 ☐ East ☑ West
1320' Feet from ☐ North / ☑ South Line of Section
1320' Feet from ☑ East / ☐ West Line of Section
Footages Calculated from Nearest Outside Section Corner:
☐ NE ☐ NW ☑ SE ☐ SW
County: Kiowa
Lease Name: Kinyon Well #: #1-33
Field Name: Greensburg SW
Producing Formation: Mississippian
Elevation: Ground: 2200 Kelly Bushing: 2209
Total Depth: 4925' Plug Back Total Depth: 4923'
Amount of Surface Pipe Set and Cemented at: 517 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: 24000 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: 02/10/2010
Subscribed and sworn to before me this 10th day of February,
20 10.
Notary Public: Barbara Feather
Date Commission Expires:

OFFICIAL SEAL
BARBARA FEATHER
NOTARY PUBLIC - STATE OF ILLINOIS
MY COMMISSION EXPIRES:12/30/10

KCC Office Use ONLY

✓ Letter of Confidentiality Received
✓ If Denied, Yes ☐ Date:
✓ Wireline Log Received
____ Geologist Report Received
____ UIC Distribution

RECEIVED
FEB 16 2010
KCC WICHITA