

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

KCC

OPERATOR: License # 4767
Name: Ritchie Exploration, Inc. **MAR 09 2010**
Address 1: P.O. Box 783188 **CONFIDENTIAL**
Address 2: _____
City: Wichita State: KS Zip: 67278 + 3118

Contact Person: John Niernberger
Phone: (316) 691-9500

CONTRACTOR: License # 30606
Name: Murfin Drilling, Co., Inc. **RECEIVED**

Wellsite Geologist: Terry McLeod **MAR 11 2010**
Purchaser: NCRA

Designate Type of Completion:
 New Well _____ Re-Entry _____ Workover _____
A 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.: _____
12/1/09 12/11/09 12/11/09
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 063-21820-0000

Spot Description: 140' N & 35' E

S/2 NW _____ Sec. 29 Twp. 13 S. R. 31 East West

1840 Feet from North / South Line of Section

1355 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW

County: Gove

Lease Name: Hess 29B Well #: 2

Field Name: _____

Producing Formation: LKC & Johnson

Elevation: Ground: 2865 Kelly Bushing: 2875

Total Depth: 4570 Plug Back Total Depth: 4518

Amount of Surface Pipe Set and Cemented at: 223 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: 2326 Feet

If Alternate II completion, cement circulated from: surface

feet depth to: 2326 w/ 260 sx cmt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content: 6700 ppm Fluid volume: 580 bbls
Dewatering 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.

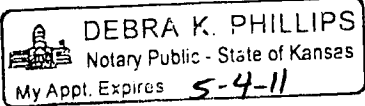
All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Signature: _____
Title: Production Manager Date: 3/9/10

Subscribed and sworn to before me this 9th day of March

20 10
Notary Public: Debra K. Phillips

Date Commission Expires: 5-4-11



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