CONFIDENTIAL KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION WELL COMP.

ORIGIN.

Form ACO-1 October 2008 Form Must Be Typed

WELL COMPLETION FORM WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 33513	API No. 15 - 033-21538-0000
Name: FIVE STAR ENERGY, INC.	Spot Description: 41' S, AND 22' E. OF
Address 1: 215 E. 14TH	SE_NV_NESE Sec. 34 Twp. 34 S. R. 20 East West
Address 2:	3176 Feet from North / South Line of Section
City: HARPER State: KS Zip: 67058 + KCC	
Contact Person: HOWARD SHORT	Footages Calculated from Nearest Outside Section Corner:
Phone: (620) 896-2710 AFT 00	NE NW SE SW
CONTRACTOR: License # 30891 CONFIDENT	County: COMANCHE
Name: LEIKER WELL SERVICE LLC	Lease Name: KUHNS Well #: 5 ~ 34
Wellsite Geologist: JEFF BURK	Field Name: BOX RANCH
Purchaser: OIL (PLAINS) GAS (DCP)	Producing Formation: VIOLA
Designate Type of Completion:	Elevation: Ground: 1715 Kelly Bushing: 1724
New Well Re-Entry Workover	Total Depth: 6309 Plug Back Total Depth: 6305
Oil SWD SIOW	Amount of Surface Pipe Set and Cemented at: 682 Feet
Gas ENHR SIGW	Multiple Stage Cementing Collar Used? ☑ Yes ☐ No
CM (Coal Bed Methane) Temp. Abd.	If yes, show depth set: 5388' Feet
Dry Other (Core, WSW, Expl., Cathodic, etc.)	If Alternate II completion, cement circulated from:
If Workover/Re-entry: Old Well Info as follows:	feet depth to:w/sx cmt.
Operator:	Drilling Fluid Management Plan
Well Name:	(Data must be collected from the Reserve Pit)
Original Comp. Date: Original Total Depth:	Chloride content: 6500 ppm Fluid volume: 560 bbls
Deepening Re-perf Conv. to Enhr Conv. to SWD	Dewatering method used: EVAPORATION
Plug Back:Plug Back Total Depth	Location of fluid disposal if hauled offsite:
Commingled Docket No.:	Operator Name: OIL PRODUCERS INC.
Dual Completion Docket No.:	Lease Name: RICH C-9 License No.: 8061
Other (SWD or Enhr.?) Docket No.:	Quarter SE Sec. 22 Twp.32 S. R. 19 East West
12/20/09 1/19/10 3/22/10	Quarter Sec. 22 Twp. S. R. 13 Seast West County: COMANCHE Docket No.: 28178
Spud Date or Date Reached TD Completion Date or Recompletion Date	County: Docket No.:
INSTRUCTIONS: An original and two copies of this form shall be filed with Kansas 67202, within 120 days of the spud date, recompletion, workover or co of side two of this form will be held confidential for a period of 12 months if requitiality in excess of 12 months). One copy of all wireline logs and geologist well BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form	nversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information uested in writing and submitted with the form (see rule 82-3-107 for confiden-I report shall be attached with this form. ALL CEMENTING TICKETS MUST
All requirements of the statutes, rules and regulations promulgated to regulate the are complete and correct to the best of my knowledge. Signature:	
// T 1x	KCC Office Use ONLY
Title: Date: $\sqrt{-3-10}$	Letter of Confidentiality Received
Subscribed and sworn to before me this 5 day of APIII	If Denied, Yes Date:
20 D NOTARY PUBLIC - State of	DECENED
Notary Public Jana Toll Toll Robert L. Mill My Appt. Expires	Geologist Report Receive ANSAS CORPORATION COMMISSION UIC Distribution
Date Commission Expires: 5/36/13	APR 0 6 2010