

ORIGINAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
October 2008
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 33372
Name: Future Petroleum Company
Address 1: P.O. Box 540225
Address 2:
City: Houston State: TX Zip: 77254
Contact Person: Chris Haefele
Phone: (713) 993-0774
CONTRACTOR: License # 30606
Name: Murfin Drilling Company
Wellsite Geologist: Kent Crisler
Purchaser:
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.)

API No. 15 - 153-20855-0001
Spot Description:
SW NE SW Sec. 16 Twp. 1 S. R. 33 East West
1820 Feet from North / South Line of Section
1660 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
NE NW SE SW
County: Rawlins
Lease Name: Drift Unit Well #: 27
Field Name: Drift
Producing Formation: Lansing
Elevation: Ground: 2947' Kelly Bushing: 2952'
Total Depth: 4160' Plug Back Total Depth: 4102'
Amount of Surface Pipe Set and Cemented at: 263' 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.

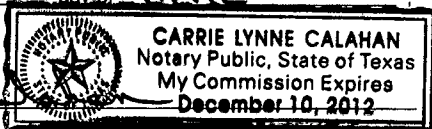
If Workover/Re-entry: Old Well Info as follows:
Operator: Future Petroleum
Well Name: Drift Unit 27
Original Comp. Date: 3/13/2008 Original Total Depth: 4160'
Deepening Re-perf. Conv. to Enhr. Conv. to SWD
Plug Back: Plug Back Total Depth
Commingled Docket No.:
Dual Completion Docket No.:
Other (SWD or Enhr.?) Docket No.:
10/9/2009 4/9/2010
Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

Drilling Fluid Management Plan amw - AH I NR
(Data must be collected from the Reserve Pit) 4-21-10
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:
Title: OPERATIONS Manager Date: April 13, 2010
Subscribed and sworn to before me this 13th day of April
20 10
Notary Public: Carrie Calahan
Date Commission Expires: 12-10-12



KCC Office Use ONLY
Letter of Confidentiality Received
If Denied, Yes Date:
Wireline Log Received
Geologist Report Received
UIC Distribution
RECEIVED
APR 19 2010

KCC WICHITA

Operator Name: Future Petroleum Company Lease Name: Drift Unit Well #: 27
 Sec. 16 Twp. 1 S. R. 33 East West County: Rawlins

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface test, along with final chart(s). Attach extra sheet if more space is needed. Attach copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run:	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Heebner</td> <td>3854</td> <td>3898</td> </tr> <tr> <td>Lansing</td> <td>3904</td> <td>3948</td> </tr> <tr> <td>Lansing "G"</td> <td>3994</td> <td>4038</td> </tr> </table>	Name	Top	Datum	Heebner	3854	3898	Lansing	3904	3948	Lansing "G"	3994	4038
Name	Top	Datum											
Heebner	3854	3898											
Lansing	3904	3948											
Lansing "G"	3994	4038											

CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
Surface Casing	12-1/4"	8-5/8"	24#	263'	60/40 poz	190	3% CC, 2% Gel
Production Casing	7-7/8"	4-1/2"	10.5#	4152'	Common	150	10% Salt, 500 Gal WFR-2

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
4	3994-98'	3000 gals 15% acid	3994-98'
6	4051-56'	500g MCA	4051-56'

TUBING RECORD:	Size: 2-3/8"	Set At: 3965	Packer At: 3965	Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr. 4/9/2010		Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)		
Estimated Production Per 24 Hours	Oil Bbls. 0	Gas Mcf 0	Water Bbls.	Gas-Oil Ratio Gravity

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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