

WELL COMPLETION FORM  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 32924  
Name: Gilbert-Stewart Operating LLC  
Address 1: Suite 450  
Address 2: 1801 Broadway  
City: Denver State: CO Zip: 80202 +  
Contact Person: Kent Gilbert  
Phone: ( 303 ) 534-1686  
CONTRACTOR: License # 33350  
Name: Southwind Drilling  
Wellsite Geologist: Adam Kennedy  
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.)

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.: \_\_\_\_\_  
February 3, 2010 February 11, 2010 2-11-10  
Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

API No. 15 - 159-22602-0000  
Spot Description: \_\_\_\_\_  
SE SW SE SE Sec. 16 Twp. 19 S. R. 9  East  West  
540' Feet from  North /  South Line of Section  
1570' Feet from  East /  West Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
 NE  NW  SE  SW  
County: Rice  
Lease Name: Lincoln Well #: 4  
Field Name: Chase Silica  
Producing Formation: Arbuckle  
Elevation: Ground: 1702' Kelly Bushing: 1712'  
Total Depth: 3338 Plug Back Total Depth: \_\_\_\_\_  
Amount of Surface Pipe Set and Cemented at: 309' Feet  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set: \_\_\_\_\_ Feet  
If Alternate II completion, cement circulated from: P&A  
feet depth to: \_\_\_\_\_ w/ \_\_\_\_\_ sx cmt.

Drilling Fluid Management Plan P&A Alt I NR  
(Data must be collected from the Reserve Pit) 5-12-10  
Chloride content: \_\_\_\_\_ ppm Fluid volume: 640 bbls  
Dewatering method used: Haul Off  
Location of fluid disposal if hauled offsite: \_\_\_\_\_  
Operator Name: Bob's Oil Service  
Lease Name: Sieker License No.: \_\_\_\_\_  
Quarter \_\_\_\_\_ Sec. 35 Twp. 19 S. R. 9  East  West  
County: Barton Docket No.: 26,497

**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: Kent C Gilbert  
Title: Manager Date: 5-3-10  
Subscribed and sworn to before me this 6<sup>th</sup> day of May, 2010  
Notary Public: \_\_\_\_\_  
Date Commission Expires: \_\_\_\_\_

KCC Office Use ONLY  
 Letter of Confidentiality Received  
 If Denied, Yes  Date: \_\_\_\_\_  
 Wireline Log Received  
 Geologist Report Received  
 UIC Distribution  
RECEIVED  
KANSAS CORPORATION COMMISSION  
MAY 10 2010

Operator Name: Gilbert-Stewart Operating LLC Lease Name: Lincoln Well #: 4  
 Sec. 16 Twp. 19 S. R. 9  East  West County: Rice

**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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i>  Samples Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No  Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i>  List All E. Logs Run: <b>DIL, MEL Por</b>	<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>Topeka</td> <td>2459</td> <td>-747</td> </tr> <tr> <td>Lansing</td> <td>2884</td> <td>-1172</td> </tr> <tr> <td>Arbuckle</td> <td>3293</td> <td>-1581</td> </tr> </table>	Name	Top	Datum	Topeka	2459	-747	Lansing	2884	-1172	Arbuckle	3293	-1581
Name	Top	Datum											
Topeka	2459	-747											
Lansing	2884	-1172											
Arbuckle	3293	-1581											

CASING RECORD <input checked="" 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	12 1/4"	8 5/8"	23#	309'	Common	180	2% Gel 3% CaCl
	7 7/8"						

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 <i>(Amount and Kind of Material Used)</i>	Depth
	DRY HOLE		

RECEIVED  
 KANSAS CORPORATION COMMISSION  
 MAY 10 1991  
 CONSERVATION DIVISION  
 WICHITA, KANSAS

TUBING RECORD: Size: _____ Set At: _____ Packer At: _____			Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Date of First, Resumed Production, SWD or Enhr. _____		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. <b>DRY</b>	Gas Mcf	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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