

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
October 2008
Form Must Be Typed

5/25/10

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 32819
Name: Baird Oil Company LLC
Address 1: PO Box 428
Address 2: _____
City: Logan State: KS Zip: 67646 + _____
Contact Person: Jim R. Baird
Phone: (785) 689-7456
CONTRACTOR: License # 33575
Name: WW Drilling, LLC
Wellsite Geologist: Richard Bell
Purchaser: D & A

KCC
MAY 25 2010
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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.: _____
Feb. 27, 2010 March 4, 2010 March 5, 2010
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 065-23623-00-00
Spot Description: 1120' FNL & 330' FWL
S2 _SW _NW _NW Sec. 1 Twp. 6 S. R. 22 East West
1120 Feet from North / South Line of Section
330 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Graham
Lease Name: Almena State Bank Well #: 3-1
Field Name: Almena
Producing Formation: D & A
Elevation: Ground: 2296 Kelly Bushing: 2301
Total Depth: 3799 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 247 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: 1900 ppm Fluid volume: 500 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: Jim R. Baird
Title: President Date: 5/27/10
Subscribed and sworn to before me this 27th day of MAY,
2010.
Notary Public: Robert B. Hartman
Date Commission Expires: 3/29/2011

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 28 2010
CONSERVATION DIVISION
WICHITA, KS

ROBERT B. HARTMAN
State of Kansas
My Appt. Exp. 3/29/11