## CONFIDENTIAL

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

## **ORIGINAL**

ALT I II III Approved by: \_\_\_\_\_ Date: \_\_\_

Form ACO-1 June 2009 Form Must Be Typed Form must be Signed All blanks must be Filled

## **WELL COMPLETION FORM WELL HISTORY - DESCRIPTION OF WELL & LEASE**

OPERATOR: License # 33922	API No. 15
Name: MUSTANG ENERGY CORPORATION HIN 1 2010	Spot Description: 115' N AND 100' E OF
Address 1: PO BOX 1121	SW_NW_NESec. 11 Twp. 10 S. R. 21 East  West
Address 2: CONFIDENT	875 Feet from ✓ North / ☐ South Line of Section
City: HAYS State: KS Zip: 67601 +	2,210 Feet from ▼ East / West Line of Section
Contact Person: RODNEY BRIN	Footages Calculated from Nearest Outside Section Corner:
705 622 0522	✓ NE □NW □SE □SW
Phone: ( 165 ) 623-0533 RECEIVED  CONTRACTOR: License # 31548	County: GRAHAM
Name: DISCOVERY DRILLING JUN 1 5 2010	Lease Name: DEYOUNG Well #: 1
Mollaita Caplaniati TONY RICHARDSON	Field Name: COOPER
Purchaser: COFFEYVILLE KCC WICHITA	Producing Formation: LKC & ARBUCKLE
Designate Type of Completion:	Elevation: Ground: 2266 Kelly Bushing: 2274
✓ New Well	Total Depth: 3880 Plug Back Total Depth: 3838
✓ SIOW	Amount of Surface Pipe Set and Cemented at: 221.14 Feet
Gas D&A ENHR SIGW	Multiple Stage Cementing Collar Used? ☐ Yes ☑ No
☐ OG ☐ GSW ☐ Temp. Abd.	If yes, show depth set:Feet
CM (Coal Bed Methane)	If Alternate II completion, cement circulated from: 3875
Cathodic Other (Core, Expl., etc.):	feet depth to: SURFACE w/ 470 sx cmt.
If Workover/Re-entry: Old Well Info as follows:	
Operator:	Drilling Shiid Managament Plan
Well Name:	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)
Original Comp. Date: Original Total Depth:	Chloride content: 14,000 ppm Fluid volume: 320 bbls
☐ Deepening ☐ Re-perf. ☐ Conv. to ENHR ☐ Conv. to SWD	Dewatering method used: EVAPORATION
Conv. to GSW	Dewatering method used.
Plug Back: Plug Back Total Depth	Location of fluid disposal if hauled offsite:
Commingled Permit #:	Operator Name: BLACK DIAMOND OIL
Dual Completion Permit #:	Lease Name: ANDRESON A License #: 7076
SWD Permit #:	QuarterSec. 16 Twp. 9 S. R. 21 East / West
ENHR Permit #:	County: GRAHAM Permit #: 15-065-01398-0002
GSW Permit #:	
Spud Date or Date Reached TD Completion Date or	
Recompletion Date Recompletion Date	
INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas 67202, within 120 days of the spud date, recompletion, workover or coperate to find two of this form will be held confidential for a period of 12 months if requitality 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
AFFIDAVIT	KCC Office Use ONLY
I am the affiant and I hereby certify that all requirements of the statutes, rules and re	equi-
lations promulgated to regulate the oil and gas industry have been fully complied	C-1
and the statements herein are complete and correct to the best of my knowledge	Confidential Release Date:
Februar 1 Min	Wireline Log Received
Signature: 7/1/4/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/	Geologist Report Received
Title: OWNER Date: 6-11-2010	UIC Distribution