CONFIDENTIAL

KANSAS CORPORATION COMMISSION RIGINAL OIL & GAS CONSERVATION DIVISION

Form ACO-1 June 2009 Form Must Be Typed Form must be Signed All blanks must be Filled 6/12/11

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

OPERATOR: License # 31930	API No. 15 API No. 15
Name: BlueRidge Petroleum Corporation	Spot Description:
Address 1: P.O. Box 1913	
Address 2:	1454
City: Enid State: OK Zip: 73702 + 19	
Contact Person: Jonathan Allen	
Phone: (580) 242-3732 KCC	
Name: Discovery Drilling Co., Inc.	Taylor 1-23
Wellsite Geologist: Josh Austin CONFIDENT	Field Name: Advance
Purchaser:	
Designate Type of Completion:	Elevation: Ground: 2512' Kelly Bushing: 2520'
▼ New Well Re-Entry Workover	Total Depth: 3975' Plug Back Total Depth:
☐ Oil ☐ wsw ☐ swb ☐ slow	
Gas D&A ENHR SIGW	
[] OG [] GSW [] Temp.	
CM (Coal Bed Methane)	If Alternate II completion, cement circulated from:
Cathodic Other (Core, Expl., etc.):	
If Workover/Re-entry: Old Well Info as follows:	
Operator:	
Well Name:	(Data must be collected from the Reserve Pit)
Original Comp. Date: Original Total Depth:	Chloride content: 12,000 ppm Fluid volume: 240 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:
r= 1	Onorotor Name:
Commingled Permit #:	Operator Name.
Dual Completion Permit #:	Lease Name: License #:
Dual Completion Permit #:	Lease Name: License #:
Dual Completion Permit #:	Lease Name: License #:
Dual Completion Permit #:	Lease Name: License #:

AFFIDAVIT

I am the affiant and I hereby certify that 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:	en la
Title: President	Date: 06/12/2010

KCC Office Use ONLY	
Letter of Confidentiality Received Date: 6-12-10 RECEIVED	
Confidential Release Date: 6-12-11 Wireline Log Received	
Geologist Report Received UIC Distribution ALT [] I [] II Approved by: Date:	