

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
October 2008
Form Must Be Typed

6/16/12

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 5046 **KCC**
 Name: RAYMOND OIL COMPANY, INC.
 Address 1: P.O. BOX 48788
 Address 2: _____
 City: WICHITA State: KS Zip: 67202 + _____
 Contact Person: CLARKE SANDBERG
 Phone: (316) 267-4214
 CONTRACTOR: License # 6039 **RECEIVED**
 Name: LD DRILLING
 Wellsite Geologist: KIM SHOEMAKER **JUN 18 2010**
 Purchaser: NCPA **KCC WICHITA**
 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 - 101-22217-0000
 Spot Description: _____
 _____ NW NW SW Sec. 5 Twp. 17 S. R. 29 East West
 _____ 2310 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: LANE
 Lease Name: MUNSELL Well #: 2
 Field Name: SHAY SOUTHEAST
 Producing Formation: _____
 Elevation: Ground: 2824' Kelly Bushing: 2829'
 Total Depth: 4675' Plug Back Total Depth: _____
 Amount of Surface Pipe Set and Cemented at: 248 Feet
 Multiple Stage Cementing Collar Used? Yes No
 If yes, show depth set: 1828 Feet
 If Alternate II completion, cement circulated from: 1828
 feet depth to: SURFACE w/ 275 sx cmt.

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.: _____
3/20/2010 4/16/2010 4-16-10
 Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

Drilling Fluid Management Plan
 (Data must be collected from the Reserve Pit)
 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: [Signature]
 Title: Geologist Date: 6/16/2010
 Subscribed and sworn to before me this 16 day of June
 20 10
 Notary Public: Tammy J Zimmerman
 Date Commission Expires: 5/19/2014

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