

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

RECEIVED

JUN 25 2010

Form ACO-1

June 2009

Form Must Be Typed

Form must be Signed

All blanks must be Filled

6/23/12

OPERATOR: License # 5144
 Name: Mull Drilling Company, Inc.
 Address 1: 1700 N. Waterfront Parkway, Bldg. #1200
 Address 2: _____
 City: Wichita State: KS Zip: 67206 + 6637
 Contact Person: Mark Shreve
 Phone: (316) 264-6366
 CONTRACTOR: License # 5929
 Name: Duke Drilling Company, Inc.
 Wellsite Geologist: Kevin Kessler
 Purchaser: N/A

KCC
JUN 23 2010
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Designate Type of Completion:
 New Well Re-Entry Workover
 Oil WSW SWD SIOW
 Gas D&A ENHR SIGW
 OG GSW Temp. Abd.
 CM (Coal Bed Methane)
 Cathodic Other (Core, Expl., 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
 Conv. to GSW
 Plug Back: _____ Plug Back Total Depth _____
 Commingled Permit #: _____
 Dual Completion Permit #: _____
 SWD Permit #: _____
 ENHR Permit #: _____
 GSW Permit #: _____

<u>3/18/10</u>	<u>3/27/10</u>	<u>3/27/10</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

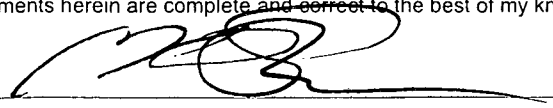
API No. 15 - 063-21833-0000 **KCC WICHITA**
 Spot Description: _____
E2_NE_SW_SW Sec. 31 Twp. 15 S. R. 26 East West
990 Feet from North / South Line of Section
1,011 Feet from East / West Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
 County: Gove
 Lease Name: Curtis "D" Well #: 1-31
 Field Name: Wildcat
 Producing Formation: N/A
 Elevation: Ground: 2563' Kelly Bushing: 2572'
 Total Depth: 4570' Plug Back Total Depth: N/A
 Amount of Surface Pipe Set and Cemented at: 232 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: 27,000 ppm Fluid volume: 1,000 bbls
 Dewatering method used: Evaporation
 Location of fluid disposal if hauled offsite: _____
 Operator Name: _____
 Lease Name: _____ License #: _____
 Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
 County: _____ Permit #: _____

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.

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: 
 Title: President/COO Date: 6/23/10

KCC Office Use ONLY

Letter of Confidentiality Received
 Date: 6-23-10
 Confidential Release Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
 ALT I II III Approved by: _____ Date: _____