

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

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 # 7311
Name: Shakespeare Oil Company, Inc.
Address 1: 202 West Main Street
Address 2: _____
City: Salem State: IL Zip: 62881 + 1519
Contact Person: Donald R. Williams
Phone: (618) 548-1585
CONTRACTOR: License # 33575
Name: WW Drilling, LLC
Wellsite Geologist: Brad Rine
Purchaser: None

KCC
JUN 06 2010
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RECEIVED
KANSAS CORPORATION COMMISSION

JUN 11 2010
CONSERVATION DIVISION
WICHITA, KS

- Designate Type of Completion:
- New Well
 - Re-Entry
 - Workover
 - Oil
 - WSW
 - SWD
 - SLOW
 - 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 #: _____

4/8/10 4/18/10 4/19/10
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 109-20894-00-00

Spot Description: _____

NE SE SW NW Sec. 17 Twp. 13 S. R. 32 East West

340 Feet from North / South Line of Section

1,040 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE
- NW
- SE
- SW

County: Logan

Lease Name: Stoll Well #: 1-17

Field Name: Wildcat

Producing Formation: None

Elevation: Ground: 2915 Kelly Bushing: 2920

Total Depth: 4725 Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: 219' 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: 38,000 ppm Fluid volume: 1000 bbls

Dewatering method used: Air dry - backfill

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: Donald R. Williams

Title: Vice President Date: 6/8/10

KCC Office Use ONLY

- Letter of Confidentiality Received
Date: 6-9-10
- Confidential Release Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT I II III Approved by: _____ Date: _____