

CONFIDENTIAL

ORIGINAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Form ACO-1
October 2008
Form Must Be Typed

6/28/10

OPERATOR: License # 8628
Name: Credo Petroleum Corporation
Address 1: 1801 Broadway #900
Address 2: _____
City: Denver State: CO Zip: 80202 + 3858
Contact Person: Jack Renfro
Phone: (303) 297-2200

API No. 15 - 009-25418-00-00
Spot Description: _____
W2 SE SE SE Sec. 10 Twp. 18 S. R. 11 East West
330 Feet from North / South Line of Section
380 Feet from East / West Line of Section

CONTRACTOR: License # 5929
Name: Duke Drilling Co., Inc.
Wellsite Geologist: Josh Austin

Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Barton County, Kansas
Lease Name: DIANE NEMNICH Well #: 1-10

Purchaser: _____
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.)

Field Name: _____
Producing Formation: _____
Elevation: Ground: 1770' Kelly Bushing: 1778'
Total Depth: 3340' Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 293 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.

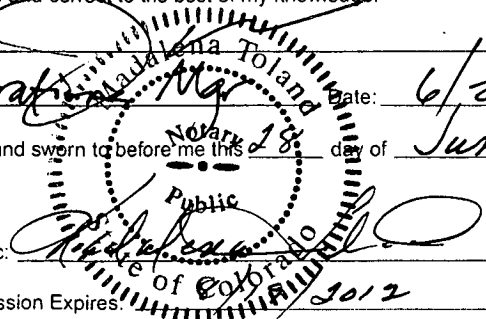
If Workover/Re-entry: Old Well Info as follows:
Operator: _____
Well Name: _____
Original Comp. Date: _____ Original Total Depth: _____
 Deepening Re-perf. Conv. to Enhr. Conv. to SWD
 Plug Back: _____ Plug Back Total Depth _____
 Commingled Docket No.: _____
 Dual Completion Docket No.: _____
 Other (SWD or Enhr.?) Docket No.: _____
05-14-10 05-18-10 5-19-10
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: 5300 ppm Fluid volume: 300 bbls
Dewatering method used: Evaporation
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: _____
Title: Operator Date: 6/28/10
Subscribed and sworn to before me this June day of 2010
Notary Public: _____
Date Commission Expires: _____



KCC Office Use ONLY
 Letter of Confidentiality Received 6/28/10
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received

UIC Distribution