

RECEIVED ORIGINAL

JUL 22 2010

Form ACO-1  
June 2009

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

KCC WICHITA  
Form Must Be Typed  
Form must be Signed  
All blanks must be Filled

WELL COMPLETION FORM  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 34352  
Name: N-10 Exploration, LLC  
Address 1: PO Box 195  
Address 2: \_\_\_\_\_  
City: Attica State: KS Zip: 67009 + \_\_\_\_\_  
Contact Person: Randy Newberry  
Phone: ( 620 ) 254-7251  
CONTRACTOR: License # 33902  
Name: Hardt Drilling, LLC  
Wellsite Geologist: Tim Pierce  
Purchaser: \_\_\_\_\_

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 #: \_\_\_\_\_  
4/28/2010    5/7/2010    5/27/2010  
Spud Date or    Date Reached TD    Completion Date or  
Recompletion Date       Recompletion Date

API No. 15 - 007-23523-00-00  
Spot Description: 100' N of W/2 NW NE  
\_\_\_\_\_ NW NE Sec. 21 Twp. 34 S. R. 11  East  West  
560 Feet from  North /  South Line of Section  
2,310 Feet from  East /  West Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
 NE     NW     SE     SW  
County: Barber  
Lease Name: Medicine River Ranch Well #: A 2  
Field Name: Landis  
Producing Formation: Mississippi  
Elevation: Ground: 1326 Kelly Bushing: 1336  
Total Depth: 4853 Plug Back Total Depth: 4810  
Amount of Surface Pipe Set and Cemented at: 276 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: \_\_\_\_\_ ppm Fluid volume: 240 bbls  
Dewatering method used: Hauled Off  
Location of fluid disposal if hauled offsite:  
Operator Name: Jody Oil & Gas Corporation  
Lease Name: Sanders 3A License #: 3288  
Quarter SW Sec. 20 Twp. 31 S. R. 8  East  West  
County: Harper Permit #: D-23, 313

**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: Rebecca D Newberry  
Title: Sec/Treas Date: 7/21/2010

KCC Office Use ONLY

Letter of Confidentiality Received  
Date: \_\_\_\_\_  
 Confidential Release Date: \_\_\_\_\_  
 Wireline Log Received  
 Geologist Report Received  
 UIC Distribution  
ALT  I  II  III Approved by: DJG Date: 7/23/10

Operator Name: N-10 Exploration, LLC Lease Name: Medicine River Ranch Well #: A 2  
 Sec. 21 Twp. 34 S. R. 11  East  West County: Barber

**INSTRUCTIONS:** Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface test, along with final chart(s). Attach extra sheet if more space is needed. Attach complete copy of all Electric Wire-line Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken  Yes  No  
 (Attach Additional Sheets)

Samples Sent to Geological Survey  Yes  No

Cores Taken  Yes  No

Electric Log Run  Yes  No

Electric Log Submitted Electronically  Yes  No  
 (If no, Submit Copy)

Log Formation (Top), Depth and Datum  Sample

Name Top Datum  
 Mississippi 4592 (-3253)

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**JUL 22 2010**  
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List All E. Logs Run:  
 Dual Induction, Dual Compensated Porosity

CASING RECORD <input checked="" type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
Surface	12-1/4"	8-5/8"	23 #	276	60:40 Poz	220	2 + 3% CC
Production	7-7/8"	5-1/2"	14#	4848	Class H	150	10% Salt

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
___ Perforate				
___ Protect Casing				
___ Plug Back TD				
___ Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
4	4592 - 4632	2000 gal 15% MCA Acid	
		Frac 1290 sx 30/70 sand	
		370 sx 16/30 sand	
		150 sx 16/30 Santrol	
		Super LC Sand	

TUBING RECORD: Size: <u>2-7/8"</u> Set At: <u>4723</u> Packer At: <u> </u> Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Date of First, Resumed Production, SWD or ENHR. <u>5/29/2010</u>	Producing Method: <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) <u> </u>
Estimated Production Per 24 Hours	Oil Bbls. <u>60</u> Gas Mcf <u>380</u> Water Bbls. <u>280</u> Gas-Oil Ratio <u>6.3 - 1</u> Gravity <u>23</u>

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input checked="" type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, Submit ACO-18.)	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled (Submit ACO-5) (Submit ACO-4) <input type="checkbox"/> Other (Specify) <u> </u>	PRODUCTION INTERVAL: <u>4592 - 4632</u>
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# ALLIED CEMENTING CO., LLC. 042047

40 P.O. BOX 31  
RUSSELL, KANSAS 67665

SERVICE POINT:

*Medicine Lodge*

DATE <i>4-29-2010</i>	SEC. <i>21</i>	TWP. <i>34s</i>	RANGE <i>11w</i>	CALLED OUT <i>6:00 AM</i>	ON LOCATION	JOB START	JOB FINISH <i>9:00 AM</i>
LEASE <i>Medicine River</i>	WELL # <i>A-#2</i>	LOCATION <i>ML south on 281 to Barber</i>			COUNTY <i>Barber</i>	STATE <i>KS</i>	
OLD OR NEW (Circle one) <i>NEW</i>				LOCATION <i>Scott Canyon Rd. 3 east 5/5</i>			

CONTRACTOR *Hardt*  
 TYPE OF JOB *Surface*  
 HOLE SIZE \_\_\_\_\_ T.D. \_\_\_\_\_  
 CASING SIZE *8 5/8* DEPTH *276'*  
 TUBING SIZE \_\_\_\_\_ DEPTH \_\_\_\_\_  
 DRILL PIPE \_\_\_\_\_ DEPTH \_\_\_\_\_  
 TOOL \_\_\_\_\_ DEPTH \_\_\_\_\_  
 PRES. MAX \_\_\_\_\_ MINIMUM \_\_\_\_\_  
 MEAS. LINE \_\_\_\_\_ SHOE JOINT \_\_\_\_\_  
 CEMENT LEFT IN CSG. *20'*  
 PERFS. \_\_\_\_\_  
 DISPLACEMENT *16 1/2' Freshwater*

OWNER *N-10 Exploration*  
 CEMENT AMOUNT ORDERED  
*220 SK 60:40:2+3% CC*

COMMON	<i>A 132 SK</i>	@ <i>15.45</i>	<i>2039.40</i>
POZMIX	<i>88 SK</i>	@ <i>8.00</i>	<i>704.00</i>
GEL	<i>4 SK</i>	@ <i>20.00</i>	<i>80.00</i>
CHLORIDE	<i>7 SK</i>	@ <i>58.20</i>	<i>407.40</i>
ASC		@	

EQUIPMENT  
 PUMP TRUCK CEMENTER *Carl Balding*  
 # *365* HELPER *Matt Thimesch*  
 BULK TRUCK # *364* DRIVER *David West*  
 BULK TRUCK # \_\_\_\_\_ DRIVER \_\_\_\_\_

HANDLING	<i>220</i>	@ <i>2.40</i>	<i>528.00</i>
MILEAGE	<i>220 / .10 / 15</i>		<i>330.00</i>
			TOTAL <i>4092.00</i>

REMARKS:

*Run 276' 8 5/8 casing  
 Break circulation  
 Mix 220 SK 60:40:2+3% CC  
 Release plug Displace  
 w/ 16 1/2 Bbls Freshwater  
 Cement did circulate  
 shut in*

SERVICE

DEPTH OF JOB	<i>276'</i>		
PUMP TRUCK CHARGE		@ <i>10.18</i>	<i>2809.96</i>
EXTRA FOOTAGE		@	
MILEAGE	<i>15</i>	@ <i>7.00</i>	<i>105.00</i>
MANIFOLD		@	

CHARGE TO: *N-10 Exploration*  
 STREET \_\_\_\_\_  
 CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

TOTAL *1123.00*

PLUG & FLOAT EQUIPMENT

<i>1-wooden plug</i>	@	<i>68.00</i>
	@	
	@	
	@	

TOTAL *68.00*

To Allied Cementing Co., LLC.  
 You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

SALES TAX (If Any) \_\_\_\_\_  
 TOTAL CHARGES \_\_\_\_\_  
 DISCOUNT \_\_\_\_\_ IF PAID IN 30 DAYS

PRINTED NAME \_\_\_\_\_  
 SIGNATURE *Scott Adkins*

RECEIVED  
 JUL 22 2010  
 KCC WICHITA

# ALLIED CEMENTING CO., LLC. 041453

140 P.O. BOX 31  
RUSSELL, KANSAS 67665

SERVICE POINT:

Medicine Lodge, KS

DATE <u>5-7-2010</u>	SEC. <u>21</u>	TWP. <u>34S</u>	RANGE <u>11W</u>	CALLED OUT <u>5:00 AM</u>	ON LOCATION <u>6:30 AM</u>	JOB START <u>12:00 PM</u>	JOB FINISH <u>1:00 PM</u>
LEASE <u>Medicine River Ranch</u>			WELL# <u>A-2</u>		LOCATION <u>Medicine Lodge, KS, South</u>	COUNTY <u>Berber</u>	STATE <u>KS</u>
OLD OR <u>(NEW)</u> (Circle one)			to Scott Canyon Rd, 3E, Sinto				

CONTRACTOR Herd #1  
 TYPE OF JOB Production  
 HOLE SIZE 7 7/8 T.D. 4853'  
 CASING SIZE 5 1/2 DEPTH 4837'  
 TUBING SIZE \_\_\_\_\_ DEPTH \_\_\_\_\_  
 DRILL PIPE \_\_\_\_\_ DEPTH \_\_\_\_\_  
 TOOL \_\_\_\_\_ DEPTH \_\_\_\_\_  
 PRES. MAX \_\_\_\_\_ MINIMUM \_\_\_\_\_  
 MEAS. LINE \_\_\_\_\_ SHOE JOINT 42'  
 CEMENT LEFT IN CSG: \_\_\_\_\_  
 PERFS. \_\_\_\_\_  
 DISPLACEMENT 118 bbls of fresh water

EQUIPMENT  
 PUMP TRUCK CEMENTER Dgr. F.  
 # 360-265 HELPER David W.  
 BULK TRUCK  
 # 364 DRIVER Ron G  
 BULK TRUCK  
 # \_\_\_\_\_ DRIVER \_\_\_\_\_

REMARKS:  
Pipe on bottom & break circulation  
Pump 20 bbls 2% KCL water, 3 bbls of fresh water, 500 gallons of ASF, 3 bbls fresh water mix 15% of cement for perforating mix 25% of scavenger cement, mix 150% of soil cement, shut down, wash pump & lines, Release Plus, start displacement, lift pressure & 93 bbls slow rate to 3 bpm at 110 bbls, Pump Plus at 118 bbls 500-11000 ps. Plug & die hold

CHARGE TO: N-10 Exploration  
 STREET \_\_\_\_\_  
 CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

To Allied Cementing Co., LLC.  
 You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME X TIM PIERCE  
 SIGNATURE X Tim Pierce

Thank You!!!

OWNER N-10 Exploration

CEMENT  
 AMOUNT ORDERED 405x 60' 40' 4% 60'  
.4% sms, 150 sp class # 10% 391'  
5# Kolsoc

COMMON	<u>A 24 SX</u>	@	<u>15.45</u>	<u>370.00</u>
POZMIX	<u>16 SX</u>	@	<u>8.00</u>	<u>128.00</u>
GEL	<u>2 SX</u>	@	<u>2.00</u>	<u>41.00</u>
CHLORIDE		@		
ASC		@		
<u>H</u>	<u>150 SX</u>	@	<u>16.75</u>	<u>2512.00</u>
<u>Kolsoc</u>	<u>700 #</u>	@	<u>.89</u>	<u>667.50</u>
<u>Salt</u>	<u>15 SX</u>	@	<u>12.00</u>	<u>180.00</u>
<u>SMS</u>	<u>14 #</u>	@	<u>2.45</u>	<u>34.30</u>
<u>Clapnet</u>	<u>14 Gals</u>	@	<u>31.25</u>	<u>437.50</u>
<u>ASF</u>	<u>500 Gals</u>	@	<u>1.27</u>	<u>635.00</u>
		@		
		@		
HANDLING		@	<u>2.40</u>	<u>468.00</u>
MILEAGE	<u>194/10/15</u>			<u>291.00</u>
				<u>TOTAL 5766.00</u>

SERVICE  
 DEPTH OF JOB 4837'  
 PUMP TRUCK CHARGE 2011.00  
 EXTRA FOOTAGE @ \_\_\_\_\_  
 MILEAGE 15 @ 7.00 105.00  
 MANIFOLD @ \_\_\_\_\_  
Head rental @ \_\_\_\_\_  
 TOTAL 2116.00

PLUG & FLOAT EQUIPMENT  
5 1/2  
 1- Guide Shoe @ 101.00  
 1- DFV Insert @ 112.00  
 1- Rubber Plug @ 74.00  
 9- Scratchers @ 50.00 270.00  
 8- Centrifugers @ 35.00 280.00  
 TOTAL 837.00

SALES TAX (If Any) \_\_\_\_\_  
 TOTAL CHARGES \_\_\_\_\_  
 DISCOUNT \_\_\_\_\_ IF PAID IN 30 DAYS

RECEIVED  
 JUL 27 2010  
 KCC WICHITA