

ORIGINAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

CONFIDENTIAL

Form ACO-1
October 2008
Form Must Be Typed

7/17/10

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 31930

Name: BlueRidge Petroleum Corporation

Address 1: P.O. Box 1913

Address 2: _____

City: Enid State: OK Zip: 73702 + 1913

Contact Person: Jonathan Allen

Phone: (580) 242-3732

CONTRACTOR: License # 5142

Name: Sterling Drilling Company

Wellsite Geologist: Josh Austin

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.)

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.: _____

6/24/2009 7/3/2009

Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 057-20634-0000

Spot Description: _____

E/2 SE SW SW Sec. 9 Twp. 27 S. R. 24 East West

330 Feet from North / South Line of Section

1,000 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Ford

Lease Name: Doll Well #: 2-9

Field Name: Gunsmoke

Producing Formation: _____

Elevation: Ground: 2,502' Kelly Bushing: 2,513'

Total Depth: 5,150' Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: 432 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/ _____

PA-Dlg - 7/29/09

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 12,700 ppm Fluid volume: 650 bbls

Dewatering method used: Haul off all free fluids, allow remaining contents to evaporate

Location of fluid disposal if hauled offsite: _____

Operator Name: Hartman Oil Co., Inc.

Lease Name: Billings SWD License No.: 30535

Quarter NE Sec. 35 Twp. 22S S. R. 23 East West

County: Hodgeman Docket No.: D27511

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]

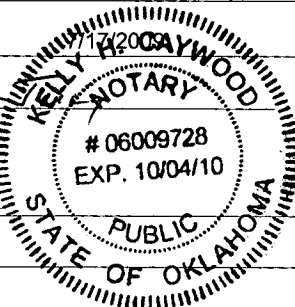
Title: President Date: _____

Subscribed and sworn to before me this 17 day of _____

20 09

Notary Public: Kelly A Caywood

Date Commission Expires: 10-24-10



KCC Office Use ONLY

Letter of Confidentiality Received

If Denied, Yes Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

KANSAS CORPORATION COMMISSION

JUL 20 2009

RECEIVED

Operator Name: BlueRidge Petroleum Corporation Lease Name: Doll Well #: 2-9
 Sec. 9 Twp. 27 S. R. 24 East West County: Ford

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 copy of all Electric Wireline 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
 (Submit Copy)

List All E. Logs Run:

Sonic, CDN, Micro, Dual Induction

<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Name	Top	Datum
Heebner	4187	-1674
Lansing	4303	-1790
BKC	4756	-2243
Marmaton	4786	-2273
Pawnee	4836	-2323
Ft. Scott	4872	-2359
Mississippi	5014	-2501

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#	432'	A-Serv-Lite	175	2% gel 3% CC
					Common	100	

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone				KCC JUL 17 2009 CONFIDENTIAL

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)	
		Amount	Depth

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TUBING RECORD: Size: _____ Set At: _____ Packer At: _____ Liner Run: Yes No

Date of First, Resumed Production, SWD or Enhr. _____ Producing Method: Flowing Pumping Gas Lift Other (Explain) _____

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, Submit ACO-18.)	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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Customer Blue Ridge	Lease No.	Date
Lease DOLL	Well # 2-9	6-25-09
Field Order # 0083	Station PRATT, KS.	Casing 5/8 Depth 2/35 County FURD State KS
Type Job CNW - 935/13 S.P.	Formation	Legal Description 7-27-24

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft		Acid	RATE	PRESS	ISIP	
2 3/8			100 SKS	1.26%				
Depth 2131.50	Depth	From	To 1752	Pre Pad	Max	KCC	5 Min.	
Volume 27.6	Volume	From	To	Pad	Min	JUL 17 2009	10 Min.	
Max Press 500	Max Press	From	To	Frac	Avg	CONFIDENTIAL	15 Min.	
Well Connection P.C.	Annulus Vol.	From	To		HHP Used		Annulus Pressure	
Plug Depth 416	Packer Depth	From	To	Flush 26.6	Gas Volume		Total Load	

Customer Representative RICK PAPP	Station Manager DAVE SCOTT	Treater STEVE ORLANDO
Service Units 27083 27463 17032 21010		
Driver Names ORLANDO LESLEY LAFFANCE		

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
12:00 AM					ON LOCATION! - SAFETY MEETING
					RUN 10 JTS. - 23" 5/8" - BASKET ON "E"
					(CIRCUIT ON BOTTOM)
					BREAK CIRC. W/ H₂O
2:09	250		5	5	H₂O
2:30	200		50	5	MIX 175 SKS. AERULITE @ 13.57 lb.
2:40	100		24	5	MIX 100 SKS. COMBINA 1 @ 13.0 lb.
					RELEASE PLUG
2:54	D			5	START H₂O DISPLACEMENT
3:00 PM	300		26.6		PLUG DOWN! - CLOSE MANIFOLD
					CIRCULATION! THRU JOB
					CIRCULATED 7 BBL TO PIT
					JOB COMPLETE,
					THANKS!
					STEVE KEELER, STEVE

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ALLIED CEMENTING CO., INC.

F

27106

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:
Liberal

DATE <u>7-3-09</u>	SEC. <u>9</u>	TWP. <u>27S</u>	RANGE <u>24 W</u>	CALLED OUT	ON LOCATION	JOB START <u>8:30</u>	JOB FINISH <u>9:30</u>
LEASE <u>Dell</u>	WELL # <u>2-9</u>	LOCATION <u>2 miles south of Dodge</u>			COUNTY <u>Ford</u>	STATE <u>KS.</u>	
OLD OR <u>NEW</u> (Circle one)		Site <u>KS. 5 mile's east N into</u>					

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CONTRACTOR Stearling Rig #2

TYPE OF JOB Plug

HOLE SIZE _____ T.D. _____

CASING SIZE _____ DEPTH _____

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT _____

OWNER _____

CEMENT AMOUNT ORDERED 250^{CK} @ 40

EQUIPMENT

PUMP TRUCK CEMENTER Kenny

470-487 HELPER Kirby

BULK TRUCK

458-462 DRIVER Margarito

BULK TRUCK

_____ DRIVER _____

COMMON	<u>150</u>	@	<u>15.45</u>	<u>2317.50</u>
POZMIX	<u>100</u>	@	<u>8.00</u>	<u>800.00</u>
GEL	<u>8.6</u>	@	<u>20.80</u>	<u>178.88</u>
CHLORIDE		@		
ASC		@		
Flo seal	<u>62#</u>	@	<u>2.50</u>	<u>155.00</u>
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>250</u>	@	<u>2.40</u>	<u>600.00</u>
MILEAGE	<u>250</u>	@	<u>.10</u>	<u>200.00</u>
TOTAL				<u>6051.38</u>

REMARKS:

Thank You

SERVICE

DEPTH OF JOB _____

PUMP TRUCK CHARGE _____ 1185.00

EXTRA FOOTAGE _____ @ _____

MILEAGE 80 @ 7.00 560.00

MANIFOLD _____ @ _____

_____ @ _____

_____ @ _____

CHARGE TO: Blue Ridge Pet Corp

STREET _____

CITY _____ STATE _____ ZIP _____

TOTAL 1145.00

PLUG & FLOAT EQUIPMENT

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

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TOTAL _____

To Allied Cementing Co., Inc.
You are hereby requested to rent cementing equipment and furnish cementer and helper 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 & understand the "TERMS AND CONDITIONS" listed on the reverse side.

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

SIGNATURE W. C. Craig

W. C. CRAIG
PRINTED NAME