

CONFIDENTIALKANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

RECEIVED

ORIGINAL

AUG 27 2010

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

KCC WICHITA

8/27/10

OPERATOR: License # 30606
Name: Murfin Drilling Company, Inc.
Address 1: 250 N. Water, Suite 300
Address 2: _____
City: Wichita State: KS Zip: 67202 + _____
Contact Person: Leon Rodak
Phone: (316) 267-3241 **KCC**
CONTRACTOR: License # 30606 **AUG 27 2010**
Name: Murfin Drilling Company, Inc. **CONFIDENTIAL**
Wellsite Geologist: Brad Rine
Purchaser: None

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 #: _____

07/03/10 07/12/10 07/14/10
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 057-20689-0000
Spot Description: _____
SW NE NW SW Sec. 6 Twp. 26 S. R. 24 ☐ East ☒ West
2055 Feet from ☐ North / ☒ South Line of Section
780 Feet from ☐ East / ☒ West Line of Section
Footages Calculated from Nearest Outside Section Corner:
☐ NE ☐ NW ☐ SE ☒ SW
County: Ford
Lease Name: Niedens Well #: 1-6
Field Name: Wildcat
Producing Formation: None
Elevation: Ground: 2522 Kelly Bushing: 2533
Total Depth: 5130 Plug Back Total Depth: None
Amount of Surface Pipe Set and Cemented at: 463 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: _____ bbls

Dewatering method used: _____

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: VP Production Date: 08/27/10**KCC Office Use ONLY**

- ☒ Letter of Confidentiality Received
Date: 8/27/10 - 8/27/12
☐ Confidential Release Date: _____
☒ Wireline Log Received
☒ Geologist Report Received
☐ UIC Distribution
ALT ☐ I ☐ II ☐ III Approved by: _____ Date: _____