

Ft. Page only

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 34192
Name: NEW GULF OPERATING, LLC.
Address 1: 6310 E. 102 ST.
Address 2: _____
City: TULSA State: OK Zip: 74137 + _____
Contact Person: WINK KOPCZYNSKI
Phone: (918) 728-3020
CONTRACTOR: License # 5929
Name: DUKE DRILLING CO. INC.
Wellsite Geologist: JOE BAKER
Purchaser: WEST WICHITA
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.)

API No. 15 - 155-21310-000
Spot Description: _____
____ SE NE NW Sec. 12 Twp. 24 S. R. 10 East West
4290 Feet from North / South Line of Section
2970 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Reno
Lease Name: BEVERLY Well #: 1
Field Name: N/A
Producing Formation: Mississippi
Elevation: Ground: 1729 Kelly Bushing: 1737
Total Depth: 4201 Plug Back Total Depth: 4010
Amount of Surface Pipe Set and Cemented at: 247 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: VESS OIL COMPANY
Well Name: MILLER #1-12
Original Comp. Date: 1/26/94 Original Total Depth: 3820
 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.: _____

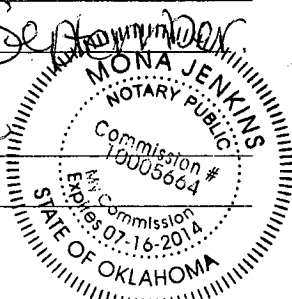
<u>3-2-10</u>	<u>3-10-10</u>	<u>3-23-10</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content: 3700 ppm Fluid volume: 1120 bbls
Dewatering method used: _____
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: [Signature]
Title: Office Administrator Date: 9-2-10
Subscribed and sworn to before me this 2nd day of September
20 10.
Notary Public: [Signature]
Date Commission Expires: _____



KCC Office Use ONLY
N Letter of Confidentiality Received
If Denied, Yes Date: _____
____ Wireline Log Received
____ Geologist Report Received
____ UIC Distribution
RECEIVED
AMENDED - Dlg - 9/3/10
SEP 03 2010