

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
October 2008
Form Must Be Typed

9/7/12

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 4767

Name: Ritchie Exploration, Inc.

Address 1: P.O. Box 783188

Address 2: _____

City: Wichita State: KS Zip: 67278 + 3118

Contact Person: John Niernberger

Phone: (316) 691-9500

CONTRACTOR: License # 5929

Name: Duke Drilling Co., Inc.

Wellsite Geologist: Tom Funk

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.: _____

6/5/10 6/14/10 6/14/10

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

API No. 15 - 057-20683-00-00

Spot Description: 240' S & 20' W of

C S/2 SE NE Sec. 5 Twp. 26 S. R. 22 East West

2550 Feet from North / South Line of Section

680 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Ford

Lease Name: Melvin Habiger Well #: 1

Field Name: _____

Producing Formation: _____

Elevation: Ground: 2418 Kelly Bushing: 2430

Total Depth: 4960 Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: 315 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: 19500 ppm Fluid volume: 1100 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: Production Manager Date: 9/7/10

Subscribed and sworn to before me this 7th day of September

20 10

Notary Public: Debra K Phillips

Date Commission Expires: 5-4-11

DEBRA K. PHILLIPS
Notary Public - State of Kansas
My Appt. Expires 5-4-11

KCC Office Use ONLY

Letter of Confidentiality Received 9/7/10-9/7/12

If Denied, Yes Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

RECEIVED

SEP 08 2010

KCC WICHITA