

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

9/25/10

Operator: License # 4767
Name: Ritchie Exploration, Inc.
Address: P.O. Box 783188
City/State/Zip: Wichita, KS 67278-3188
Purchaser: _____
Operator Contact Person: Craig Caulk
Phone: (316) 691-9500
Contractor: Name: Duke Drilling Co., Inc.
License: 5929
Wellsite Geologist: Mike Engelbrecht

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SIOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expt, 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./SWD
 Plug Back Plug Back Total Depth
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Enhr.?) Docket No. _____

| | | |
|-----------------------------------|-----------------|---|
| 6/3/08 | 6/14/08 | 6/14/08 |
| Spud Date or Recompletion Date | Date Reached TD | Completion Date or Recompletion Date |

API No. 15 - 057-20606-0000
County: Ford
approx. NE NE NW Sec. 18 Twp. 27 S. R. 23 East West
335 feet from S N (circle one) Line of Section
2366 feet from E W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Gene Carson Well #: 1

Field Name: _____
Producing Formation: _____
Elevation: Ground: 2420' Kelly Bushing: 2432'
Total Depth: 5115' Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 439 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 API 11-2408
(Data must be collected from the Reserve Pit)
Chloride content 32000 ppm Fluid volume 1800 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: Craig Caulk
Title: Geologist Date: 9/25/08

Subscribed and sworn to before me this 25th day of September, 2008.

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
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

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Operator Name: Ritchie Exploration, Inc. Lease Name: Gene Carson Well #: 1
 Sec. 18 Twp. 27 S. R. 23 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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: Dual Induction Log Compensated Density/Neutron Log | <input type="checkbox"/> Log Formation (Top), Depth and Datum <input checked="" type="checkbox"/> Sample Name Top Datum SEE ATTACHED <div style="text-align: center;"> KCC SEP 25 2008 CONFIDENTIAL </div> |
|---|---|

| 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 | 414 | class A | 350 | 3%cc, 2% gel |
| | | | | | | | |
| | | | | | | | |

| 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 | | | | |
| | | | | |

| 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 |
|----------------|---|---|-------|
| | | | |
| | | | |
| | | | |
| | | | |

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| TUBING RECORD | Size | Set At | Packer At | Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
|--|-----------|---|-------------|---|
| | | | | |
| Date of First, Resumerd Production, SWD or Enhr. | | Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) | | |
| Estimated Production Per 24 Hours | Oil Bbls. | Gas Mcf | Water Bbls. | Gas-Oil Ratio Gravity |

Disposition of Gas METHOD OF COMPLETION Production Interval

Vented Sold Used on Lease
 Open Hole Perf. Dually Comp. Commingled
(If vented, Submit ACO-18.)
 Other (Specify) _____



RITCHIE

EXPLORATION, INC.
Wichita, Kansas

#1 Gene Carson
335' FNL & 2366' FWL
5' S & 56' E of C NE NE NW Section 18-27S-23W
Ford County, Kansas
API# 15-057-20606-0000
Elevation: 2420' GL, 2432' KB

| <u>Sample Tops</u> | | | Ref. Well |
|--------------------|-------|-------|--------------|
| Anhydrite | 1452' | +980 | -8 |
| Chase Herrington | n/a | | |
| Stotler | n/a | | |
| Heebner | 4138' | -1706 | -14 |
| Lansing | 4260' | -1828 | -7 |
| Stark Shale | 4566' | -2134 | -7 |
| Pawnee | 4796' | -2364 | -17 |
| Cherokee Shale | 4838' | -2406 | -13 |
| Atoka Shale | 4934' | -2502 | -16 |
| Morrow Sand | 4968' | -2536 | -24 |
| Mississippian | 5015' | -2583 | -27 |
| RTD | 5115' | -2683 | |

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CONSERVATION DIVISION
WICHITA, KS

ALLIED CEMENTING CO., LLC. 34035

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

SERVICE POINT:
Medicine Lodge, KS

| | | | | | | | |
|--|-----------------|---|------------------|---------------------------|---------------------------|-------------------------|--------------------------|
| DATE <i>06 Jun 08</i> | SEC. <i>1 B</i> | TWP. <i>27s</i> | RANGE <i>23w</i> | CALLED OUT <i>1:230Am</i> | ON LOCATION <i>2:30Am</i> | JOB START <i>4:30Am</i> | JOB FINISH <i>5:15Am</i> |
| LEASE <i>Gene Carson</i> | WELL# <i>1</i> | LOCATION <i>154 & Willmonds Rd, 1s,</i> | | | COUNTY <i>Ford</i> | STATE <i>KS</i> | |
| OLD OR <input checked="" type="radio"/> NEW (Circle one) | | | | <i>2ME, N/A</i> | | | |

CONTRACTOR *Duke #1* OWNER *Ritchie Explo.*

TYPE OF JOB *Surface*
 HOLE SIZE *1 3/4* T.D. *415*
 CASING SIZE *8 5/8* DEPTH *415*
 TUBING SIZE DEPTH
 DRILL PIPE DEPTH
 TOOL DEPTH
 PRES. MAX *300* MINIMUM
 MEAS. LINE SHOE JOINT *-*
 CEMENT LEFT IN CSG. *15'*
 PERFS.
 DISPLACEMENT *2 5/8 Bbls Fresh H₂O*

CEMENT
 AMOUNT ORDERED *350sx "A" + 3% cut*
2% gel

| | | | | |
|----------|-----------------------|---|--------------|----------------|
| COMMON | <i>350 A</i> | @ | <i>14.20</i> | <i>4970.00</i> |
| POZMIX | | @ | | |
| GEL | <i>7</i> | @ | <i>18.75</i> | <i>131.25</i> |
| CHLORIDE | <i>12</i> | @ | <i>52.45</i> | <i>629.40</i> |
| ASC | | @ | | |
| | | @ | | |
| | | @ | | |
| | | @ | | |
| | | @ | | |
| | | @ | | |
| | | @ | | |
| HANDLING | <i>369</i> | @ | <i>2.15</i> | <i>793.35</i> |
| MILEAGE | <i>70 x 369 x .09</i> | | | <i>2324.70</i> |
| TOTAL | | | | <i>8848.70</i> |

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EQUIPMENT
 PUMP TRUCK CEMENTER *D. Felio*
 # *352* HELPER *M. Becker*
 BULK TRUCK
 # *363* DRIVER *R. Franklin*
 BULK TRUCK
 # DRIVER

REMARKS:
*Pipe on Bttm, Break Circ., Pump
 Spacer, Mix 350sx A 3% cement,
 Stop Pump, Release Plug, Start Disp
 w/ Fresh H₂O, Wash up on Plug, See
 Increase in PSI, Slow Rate, Stop
 Stop Pump at 2 5/8 Bbls total
 Disp, Shut in, Cement Did Circ.*

SERVICE
 DEPTH OF JOB *415*
 PUMP TRUCK CHARGE *0-300'* *917.00*
 EXTRA FOOTAGE *115'* @ *.80* *92.00*
 MILEAGE *70* @ *2.00* *140.00*
 MANIFOLD *head rental* @ *113.00* *113.00*

CHARGE TO: *Ritchie Explo.*
 STREET _____
 CITY _____ STATE _____ ZIP _____

TOTAL *1612.00*

PLUG & FLOAT EQUIPMENT

| | | | |
|--------------------|---|---------------|---------------|
| <i>1-TRP-8 5/8</i> | @ | <i>113.00</i> | <i>113.00</i> |
| | @ | | |
| | @ | | |
| | @ | | |

TOTAL *113.00*

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.

PRINTED NAME *Mike Godfrey*
 SIGNATURE *Mike Godfrey*

SALES TAX (If Any) _____
 TOTAL CHARGES *8848.70*
 DISCOUNT *7157.70* IF PAID IN 30 DAYS

ANY APPLICABLE TAX
 WILL BE CHARGED
 UPON INVOICING

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 CONSERVATION DIVISION
 WICHITA, KS

FORD 10 WORTHY 400 15 TE NW 1070

BASIC

Energy services, L.P.

TREATMENT REPORT

| | | |
|--|-------------------------|--------------------------------------|
| Customer <i>Artchie Exploration</i> | Lease No. | Date <i>6-14-08</i> |
| Lease <i>Jane P. Ross</i> | Well # <i>1</i> | |
| Field Order # <i>18203</i> | Station <i>Pratt</i> | Casing <i>13.0</i> |
| | Depth <i>1500</i> | County <i>FORD</i> |
| Type Job <i>CNW P.T.H.</i> | Formation <i>N</i> | Legal Description <i>18-27-23</i> |

| PIPE DATA | | PERFORATING DATA | | FLUID USED | | TREATMENT RESUME | | |
|-----------------|--------------|------------------|----|-----------------------------|------------|------------------|------------------|--|
| Casing Size | Tubing Size | Shots/Ft | | Acid | RATE | PRESS | ISIP | |
| Depth | Depth | From | To | Pre Pad <i>KCS</i> | Max | | 5 Min. | |
| Volume | Volume | From | To | Pad <i>SEP 25 2008</i> | Min | | 10 Min. | |
| Max Press | Max Press | From | To | Frac <i>CONFIDENTIAL</i> | Avg | | 15 Min. | |
| Well Connection | Annulus Vol. | From | To | Flush | HHP Used | | Annulus Pressure | |
| Plug Depth | Packer Depth | From | To | | Gas Volume | | Total Load | |

Customer Representative: _____ Station Manager: *DAVE SCOT* Treater: *ROBERT SULLIVAN*

| | | | | | | | | | |
|---------------|-----------------|--------------|--------------|----------------|--------------|--|--|--|--|
| Service Units | <i>15867</i> | <i>19959</i> | <i>20920</i> | <i>19960</i> | <i>19918</i> | | | | |
| Driver Names | <i>Sullivan</i> | <i>Mason</i> | <i>20920</i> | <i>FREEMAN</i> | | | | | |

| Time | Casing Pressure | Tubing Pressure | Bbls. Pumped | Rate | Service Log |
|-------------|-----------------|-----------------|--------------|----------|-----------------------------------|
| <i>0915</i> | | | | | <i>ON loc safety meeting</i> |
| | | | | | <i>P.T.H.</i> |
| | | | | | <i>st</i> |
| | | | | | <i>1500 plug w/50sk 6 1/4 po2</i> |
| <i>0950</i> | | | <i>10</i> | <i>4</i> | <i>st 4" spacer</i> |
| | <i>100</i> | | <i>12</i> | | <i>mix cnt 50sk</i> |
| <i>1010</i> | | | <i>15</i> | <i>4</i> | <i>Disp w/ mud AND shut down</i> |
| | | | | | <i>st</i> |
| <i>1040</i> | | | <i>10</i> | | <i>st 4" spacer</i> |
| | <i>100</i> | | <i>18</i> | <i>4</i> | <i>mix cnt 75sk 6 1/4</i> |
| <i>1047</i> | | | <i>3</i> | | <i>Disp @ shut down</i> |
| | | | | | <i>3" 420' w/50sk</i> |
| <i>1105</i> | | | <i>10</i> | | <i>st 4" spacer</i> |
| | | | <i>12</i> | <i>4</i> | <i>mix cnt</i> |
| <i>1112</i> | | | <i>12</i> | | <i>Disp @ shut down</i> |
| <i>1220</i> | | | <i>5</i> | <i>3</i> | <i>4" TOP 60' w/20sk</i> |
| <i>1230</i> | | | <i>7</i> | <i>3</i> | <i>Plug R.H. a M.H.</i> |
| | | | | | <i>job complete</i> |
| | | | | | <i>Thank you</i> |

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