

CONFIDENTIAL KANSAS CORPORATION COMMISSION
CONFIDENTIAL OIL & GAS CONSERVATION DIVISION

ORIGINAL

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

10/5/12

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 # _____
 Name: _____
 Wellsite Geologist: _____
 Purchaser: NCRA

API No. 15 - 063-21781-00-01
 Spot Description: 50'S & 279' E of C SE NE SE
SE NE SE Sec. 20 Twp. 13 S. R. 31 East West
1,600 Feet from North / South Line of Section
51 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
 County: Gove
 Lease Name: Hess Unit Well #: 1
 Field Name: _____

Producing Formation: LKC
 Elevation: Ground: 2877' Kelly Bushing: 2886'
 Total Depth: 4577' Plug Back Total Depth: 4540'
 Amount of Surface Pipe Set and Cemented at: 232 Feet
 Multiple Stage Cementing Collar Used? Yes No
 If yes, show depth set: 2356' Feet
 If Alternate II completion, cement circulated from: surface
 feet depth to: 2356' w/ 385 sx cmt.

- 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: Ritchie Exploration
 Well Name: Hess Unit 1
 Original Comp. Date: 6/26/09 Original Total Depth: 4577
 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 #: _____

6/25/10	6/28/10	6/28/10
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: _____ 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.

RECEIVED

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: Production Manager Date: 10/5/10

KCC Office Use ONLY

Letter of Confidentiality Received
 Date: 10/5/10 - 10/5/12
 Confidential Release Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
 ALT I II III Approved by: _____ Date: _____

OCT 06 2010
 KCC WICHITA