KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form Must Be Typed Form must be Signed All blanks must be Filled

Form ACO-1

WELL COMPLETION FORM WELL HISTORY - DESCRIPTION OF WELL & LEASE

| | API No. 15 - 051-26036-00-00 |
|--|--|
| N L.L.C. | Spot Description: |
| | E/2_NW_NW_NW_Sec12_Twp11_S. R20 ☐ East ♥ West |
| | 330 Feet from V North / South Line of Section |
| KS Zip: 67625 + | |
| · ZIP· T \ | |
| · · · · · · · · · · · · · · · · · · · | Footages Calculated from Nearest Outside Section Corner: |
| RECEIVED | UNE ☑NW USE USW |
| OCT 1 9 2010 | County:_ELLIS Lease Name: KELLER/DAVIS Well #: 1 |
| NI : | |
| " KCC WICHITA | Field Name: WARREN |
| | Producing Formation: |
| | Elevation: Ground: 2045 Kelly Bushing: 2050 |
| try Workover | Total Depth: 3645 Plug Back Total Depth: |
| ☐ swd ☐ slow | Amount of Surface Pipe Set and Cemented at: 235 Feet |
| ☐ ENHR ☐ SIGW | Multiple Stage Cementing Collar Used? |
| GSW Temp. Abd. | If yes, show depth set: Feet |
| | If Alternate II completion, cement circulated from: |
| xpl., etc.): | feet depth to:w/sx cmt. |
| s follows: | |
| | Drilling Fluid Management Plan |
| | (Data must be collected from the Reserve Pit) |
| Original Total Depth: | Chloride content:ppm Fluid volume:bbls |
| Conv. to ENHR Conv. to SWD | Dewatering method used: |
| Conv. to GSW Plug Back Total Depth | Location of fluid disposal if hauled offsite: |
| ermit #: | • |
| ermit #: | Operator Name: |
| ermit #: | Lease Name: License #: |
| ermit #: | Quarter Sec TwpS. R |
| ermit #: | County: Permit #: |
| 2010 9-30-10 | |
| d TD Completion Date or Recompletion Date | · |

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

OPERATOR: License #_ 33306

BOX 150

Address 1: Address 2: City: BOGUE

Contact Person:

CONTRACTOR: License # **MURFIN DRLG** Wellsite Geologist: MIKE DAVIGNON

Designate Type of Completion:

CM (Coal Bed Methane)

New Well

Phone: (

Purchaser:

Oil

☐ Gas

OG

Operator: _ Well Name:

Original Comp. Date: _

Deepening

Plug Back:

Commingled

SWD

ENHR

GSW

9-24-2010

Spud Date or Recompletion Date

Dual Completion

BLAKE EXPLORATION L.L.C.

MIKE DAVIGNON

421-2921

☐ wsw

V D&A

Cathodic Other (Core, Expl., etc.): If Workover/Re-entry: Old Well Info as follows:

Re-perf.

State: KS

Re-Entry

SWD

ENHR

☐ GSW

Permit #:

Permit #:

Permit #:

Permit #:

Permit #:

*79*7-2010

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: UP | Date: 10-20 -2010 |

| KCC Office Use ONLY |
|---|
| Letter of Confidentiality Received |
| Date: |
| Confidential Release Date: |
| Wireline Log Received |
| Geologist Report Received |
| UIC Distribution 2.10 |
| UIC Distribution PAA ALT I III III Approved by: DC Date: 11 2 10 |

Side Two

| Operator Name: BL | AKE EXPLORATE | ON L.L.C. | Lease I | Name: _ | KELLER/DA | VIS | Well #:1 | | |
|---|------------------------|---|---------------------------------------|-----------|------------------|--------------------|---------------------|--|--|
| Sec. 12 Twp. 11 | s. R. <u>20</u> | ☐ East | County | | | | | | |
| time tool open and clo recovery, and flow rate | osed, flowing and shut | d base of formations pe t-in pressures, whether st, along with final chart well site report. | shut-in press | sure rea | ched static leve | l, hydrostatic pi | ressures, bottom | hole temp | erature, fluid |
| Drill Stem Tests Taker (Attach Additional | | ✓ Yes | | r | .og Formati | on (Top), Depth | and Datum | ? ; | Sample |
| Samples Sent to Geo | logical Survey | ☐ Yes | | Nam | ne /DRITE | | Top 1448 | | Datum 602 |
| Cores Taken | | Yes No | | HEEB | | | 3278 | | 228 |
| Electric Log Run Electric Log Submitte | d Electronically | Yes No | | LANS | ING | | 3320 | -1 | 270 |
| (If no, Submit Copy |) | | | В-КС | IOKI E | | 3533 3637 | | 483 587 |
| List All E. Logs Run: NONE | | | | ARBU | JCKLE | | 3037 | -1 | 567 |
| | | CASING Report all strings set- | RECORD | | ew Used | tion etc | | | |
| Purpose of String | Size Hole Drilled | Size Casing Set (In O.D.) | Weig | ght | Setting Depth | Type of Cement | # Sacks Used | | and Percent dditives |
| SURFACE | | 8 5/8" | 20# | | 235 | сом | 175 | 3%C.C | . 2% GEL |
| | | | | | | | | | |
| | | | | | | | | | |
| | | ADDITIONA | L CEMENTIN | NG / SQL | JEEZE RECORD |) | | | <u>. </u> |
| Purpose: Perforate Protect Casing | Depth Top Bottom | Type of Cement | # Sacks | Used | | Type ar | nd Percent Additive | S | |
| Plug Back TD Plug Off Zone | | | | | | | | | |
| Shots Per Foot | | N RECORD - Bridge Plus | | | Acid, Fre | ncture, Shot, Cerr | ent Squeeze Reco | rd | |
| 0,100,10,100,1 | Specify Fo | ootage of Each Interval Pe | rforated | | (A | mount and Kind o | | ** ** | Depth |
| | | | · · · · · · · · · · · · · · · · · · · | | | | RECE | IVED | |
| | | | | | | | OCT 1 | 9 2010 | |
| | | | | | | - 1 | KCC WI | CHIT | 4 |
| | | | | | | | | | |
| TUBING RECORD: | Size: | Set At: | Packer At: | : | Liner Run: | Yes [| No | | |
| Date of First, Resumed | Production, SWD or ENH | IR. Producing Met | hod: | , 🗆 | Gas Lift (| Other (Explain) | | | |
| Estimated Production Per 24 Hours | Oil B | bis. Gas | Mcf | Wate | er B | bis. | Gas-Oil Ratio | | Gravity |
| DISPOSITIO | ON OF GAS: | | METHOD OF | COMPLE | -TION: | | PRODUCTI | ON INTERV | /AI · |
| Vented Sold | | | | Dually | Comp. Co | mmingled | | C. T. H. T. L. | - New |
| (If vented, Sub | mit ACO-18.) | Other (Specify) | | (Submit A | 9CO-5) (Sub | mit ACO-4) | | | |

ALLIED CEMENTING CO., LLC. 039019

| REMIT TO P.O. BOX 31 RUSSELL, KANSAS 67665 | | at medaří ele | SERV | ICE POINT: | ey_ |
|--|---|---|--------------------------|------------------|--|
| | GE C. | ALLED OUT | ON LOCATION | JOB START | JOB FINISH |
| K-11-12 | ATION GILLS | n-C411 | | COUNTY | STATE |
| OLD OF NEW (Eircle one) | 126 15 | | | | e de la companya de l |
| CASING SIZE TUBING SIZE DEPTH TUBING SIZE DEPTH DRILL PIPE DEPTH TOOL DEPTH TOOL PRES. MAX MINIMU MEAS. LINE CEMENT LEFT IN CSG. PERFS. DISPLACEMENT EQUIPMENT PUMP TRUCK # "> \ HELPER # "> \ HELPER BULK TRUCK | 235 ¹ 235 ¹ M DINT | CEMENT AMOUNT ORL COMMON POZMIX GEL CHLORIDE ASC | 175 3 6 | 20 | 2362 |
| # DRIVER | | HANDLING_ | 175 10/5Kym | | 175 |
| REMARKS: | culauk e | MILEAGE | SERVI | TOTAL | 3107 23 |
| Sobjerphologici: | co pm | EXTRA FOOTA | CHARGE | | 991 |
| | <u>terce</u> | MILEAGE | | _@ | 140 |
| STREET | " al on | ing. Nggangan sa arab gan sa | RECEIVED OCT 1 9 2010 | TOTAL | 1131 |
| CITYSTATE | | K | L C WACHPIN | (EQUIPMEN | T |
| To Allied Cementing Co., LLC. You are hereby requested to rent cementing and furnish cementer and helper(s) to assign the control of the cont | ng equipment ist owner or | | · | @ @ @ @ | |
| contractor to do work as is listed. The abdone to satisfaction and supervision of over | | | | TOTAL | erika N ajarah dari |

contractor. I have read and understand the "GENERAL

SALES TAX (If Anv) NS Dee Bid

ALLIED CEMENTING CO., LLC. 041997

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

contractor. I have read and understand the "GENERAL

SERVICE POINT:

Russell KS

| PATE 9-30-10 | SEC. | TWP. | RANGE 20 | | CALLED OUT | ON LOCA | | B START ?:30am | JOB FINISH |
|---|---|---------------------------------------|--------------------------|---|--|--|----------------|--------------------------------------|--|
| Keller/Davis EASE | WELL#/ | | LOCATION & | llis M | CS North to | County A | line C | OUNTY. | STATE |
| OR (VEW)(Cir | cle one) | | P . | | eth South | | | | |
| TONTED A CEOR A | M C. | D-11 | | | OWNER | | | | |
| CONTRACTOR | MATIN | Prill | ng Nig -D | - 3 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 | OWNER | | | | |
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| CASING SIZE | | DE | PTH | <u> </u> | AMOUNT | ORDERED _ | X20 8 | C =740 41 | 1.64 14 1 |
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| 25 sk@ 34 25 sk@ 14 100 sk@ 72 | RÉM (18 ° (70 ' | | | | MILEAGE DEPTH OF | ./04/sk S JOB | /mi/e. | TOTAL | 46000 |
| 25 sk@ 34 25 sk@ 19 100 sk@ 73 40 sk@ 28 | RÉN 470' 50' | | | | MILEAGE DEPTH OF PUMPTRU | JOS/SK S JOB_ JCK-CHARGE | /mi/s. | TOTAL | 460 <u>00</u> 38486 |
| 25 sk@ 34 25 sk@ 14 100 sk@ 72 | RÉN 470' 50' | | | | MILEAGE DEPTH OF PUMP TRU EXTRA FO | S JOB_ JCK-CHARGE DOTAGE | /mi/s. SERVICE | TOTAL | 38486 38486 |
| 25 sk@ 31 25 sk@ 14 100 sk@ 72 40 sk@ 28 10 sk@ 40 | REM (18' (70' 50' | | | | DEPTH OF PUMP TRU EXTRA FO | JOS/SK S JOB JCK-CHARGE OTAGE 2 | /mi/s. SERVICE | TOTAL | 460 <u>00</u> 38486 |
| 25 sk@ 34 25 sk@ 19 100 sk@ 73 40 sk@ 28 | REM (18' (70' 50' | | | | MILEAGE DEPTH OF PUMP TRU EXTRA FO | JOS/SK S JOB JCK-CHARGE OTAGE 2 | /nai/s. | TOTAL | 38486 38486 |
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| 25 sk@ 34 25 sk@ 14 100 sk@ 72 40 sk@ 40 30 sk Ray-ha CHARGE TO: B | REN (18' (70' (50') (1e STA | íarks: Explo | zip | C | DEPTH OF PUMP TRUEXTRA FOR MILEAGE MANIFOL | SION/SK SION SION SION SION SION SION SION SION | PLOAT E | TOTAL | 46000 38486 99De 14000 |
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