

ORIGINAL

Form ACO-1
June 2009

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

11/12/12

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 34038
Name: Flatirons resources LLC
Address 1: 303 E. 17th Ave
Address 2: Suite 940
City: Denver State: CO Zip: 80203
Contact Person: John Marvin
Phone: (303) 292-3902 ext 229
CONTRACTOR: License # 33575
Name: WW Drilling, LLC
Wellsite Geologist: Tim Priest
Purchaser: Texon L.P.

KCC

NOV 12 2010

CONFIDENTIAL

Designate Type of Completion:

- New Well Re-Entry Workover
- Oil WSW SWD SLOW
- 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: _____
Well Name: _____

Original Comp. Date: _____ Original Total Depth: _____

- 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 #: _____

9/22/2010 9/29/2010 10/26/2010
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 065-23678-00-00

Spot Description: _____

NE NE NW NW Sec. 19 Twp. 6 S. R. 21 East West
140 Feet from North / South Line of Section
1,100 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE NW SE SW

County: Graham

Lease Name: Worcester Unit Well #: 11-19

Field Name: wildcat

Producing Formation: Lansing KC ~~_____~~ & Toronto

Elevation: Ground: 2299 Kelly Bushing: 23.4

Total Depth: 3865 Plug Back Total Depth: 3831

Amount of Surface Pipe Set and Cemented at: 259 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: 1916 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: 2000 ppm Fluid volume: 1000 bbls

Dewatering method used: air dry - backfill

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.

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: Managing Director Date: 11/12/2010

KCC Office Use ONLY RECEIVED

- Letter of Confidentiality Received Date: 11/12/10 - 11/12/10 NOV 12 2010
- Confidential Release Date: _____
- Wireline Log Received KCC WICHITA
- Geologist Report Received
- UIC Distribution
- ALT I II III Approved by: _____ Date: _____