

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
October 2008
Form Must Be Typed

12/3/12

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 5822
Name: VAL ENERGY INC.
Address 1: 200 W. DOUGLAS SUITE 520
Address 2: _____
City: WICHITA State: KS Zip: 67202 + _____
Contact Person: K. TODD ALLAM KCC
Phone: (316) 263-6688 DEC 03 2010
CONTRACTOR: License # 5822
Name: VAL ENERGY INC. CONFIDENTIAL
Wellsite Geologist: ZEB STEWART
Purchaser: MACLASKEY

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.: _____

11/4/2010 11/13/2010 12/10/10
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 007-23601-00-00
Spot Description: _____
SE NE SW Sec. 3 Twp. 33 S. R. 12 ☐ East ☒ West
1650 Feet from ☐ North / ☒ South Line of Section
2970 Feet from ☒ East / ☐ West Line of Section
Footages Calculated from Nearest Outside Section Corner:
☐ NE ☐ NW ☒ SE ☐ SW
County: BARBER
Lease Name: PYLE Well #: 3-3 SWD
Field Name: UNKNOWN
Producing Formation: NA
Elevation: Ground: 1476 Kelly Bushing: 1487
Total Depth: 5476 Plug Back Total Depth: 4938
Amount of Surface Pipe Set and Cemented at: 212 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: 36000 ppm Fluid volume: 900 bbls
Dewatering method used: HAUL OFF

Location of fluid disposal if hauled offsite:

Operator Name: VAL ENERGY INC
Lease Name: MARY DIEL SWD License No.: 5822
Quarter _____ Sec. 29 Twp. 34S S. R. 11 ☐ East ☒ West
County: BARBER Docket No.: D30438

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: [Signature]

Title: OPERATIONS Date: 12/3/10

Subscribed and sworn to before me this 3 day of DECEMBER

20 10

Notary Public: [Signature]

Date Commission Expires: 2/24/2014

NOTARY PUBLIC - State of Kansas
BRANDI WYER
My Appt. Expires 2/24/2014

KCC Office Use ONLY

☒ Letter of Confidentiality Received 12/3/10 - 12/3/12
If Denied, Yes ☐ Date: _____
☐ Wireline Log Received
☒ Geologist Report Received
☒ UIC Distribution

RECEIVED

DEC 03 2010

KCC WICHITA