

CONFIDENTIAL

KANSAS CORPORATION COMMISSION  
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

12/2/11

OPERATOR: License # 31930  
Name: BlueRidge Petroleum Corporation  
Address 1: P.O. Box 1913  
Address 2:  
City: Enid State: OK Zip: 73702 + 1913  
Contact Person: Jonathan Allen  
Phone: (580) 242-3732  
CONTRACTOR: License # 31548  
Name: Discovery Drilling Co., Inc.  
Wellsite Geologist: Josh Austin  
Purchaser:

API No. 15 - 065-23684-00-00  
Spot Description:  
SE NW NE SW Sec. 22 Twp. 6 S. R. 25 East West  
2,215 Feet from North / South Line of Section  
1,872 Feet from East / West Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
NE NW SE SW  
County: Graham  
Lease Name: Lindenman Well #: 1-22  
Field Name: Wildcat  
Producing Formation:

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.):

Elevation: Ground: 2566' Kelly Bushing: 2574'  
Total Depth: 3951 Plug Back Total Depth:  
Amount of Surface Pipe Set and Cemented at: 351 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.

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 #:  
10/14/10 10/21/10 10/21/10  
Spud Date or Date Reached TD Completion Date or  
Recompletion Date Recompletion Date

Drilling Fluid Management Plan  
(Data must be collected from the Reserve Pit)  
Chloride content: 22,000 ppm Fluid volume: 1200 bbls  
Dewatering method used: Evaporation  
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: [Signature]  
Title: President Date: 12/2/10

KCC Office Use ONLY  
 Letter of Confidentiality Received  
Date: 12/2/10 - 12/2/11  
 Confidential Release Date: DEC 06 2010  
 Wireline Log Received  
 Geologist Report Received  
 UIC Distribution  
KCC WICHITA  
ALT  I  II  III Approved by: Date: