CONFIDENTIAL

ABERCROMBIE ENERGY, LLC.

State: KS

Re-Entry

☐ SWD

☐ ENHR

☐ GSW

Re-perf. Conv. to ENHR Conv. to SWD

_ Plug Back Total Depth

Completion Date or

Recompletion Date

Permit #: _____

Conv. to GSW

Permit #: _

Permit #

Permit #: _

Permit #

10209 W. CENTRAL, SUITE 2

262-1841

OPERATOR: License # ____13457

Contact Person: MARK R. GALYON

Wellsite Geologist: ROGER L. MARTIN

WSW

✓ D&A

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

Original Comp. Date: _____ Original Total Depth: ___

12-08-2010

Date Reached TD

CONTRACTOR: License # 33575

Name: WW DRILLING, LLC.

Designate Type of Completion:

CM (Coal Bed Methane)

X New Well

Address 1: __

Address 2:

City: WICHITA

Phone: (_316

Purchaser:

Oil

Gas

OG

Operator: ___

Well Name:

Deepening

Plug Back: _ Commingled

SWD

☐ ENHR

☐ GSW

12-01-2010

Spud Date or Recompletion Date

Dual Completion

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

JAN 0 5 2011

RECEIVED

__ Zip: __67212

Workover

SIOW ☐ SIGW

Temp. Abd.

135-25189-00-00 API No. 15 -Spot Description:. W/2_NE_SW_SW Sec. 11 Twp. 19 S. R. 26 East West __ Feet from __ North / \overline{\mathcal{V}} South Line of Section 780 __ Feet from __ East / 🗹 West Line of Section Footages Calculated from Nearest Outside Section Corner: NE NW SE ✓SW County:_NESS IAN 06 2011 ____ Well #: _1-11 DAY Lease Name: Field Name: WCV NORTHWEST KCC WICHITA Producing Formation: _ Elevation: Ground: 2603' _____ Kelly Bushing: __2608' Total Depth: 4670' Plug Back Total Depth: Amount of Surface Pipe Set and Cemented at: 274 Multiple Stage Cementing Collar Used? Yes X No If yes, show depth set: ___ If Alternate II completion, cement circulated from: **Drilling Fluid Management Plan** (Data must be collected from the Reserve Pit) ___ppm Fluid volume: 900 ____ bbls Chloride content: 19,200 Dewatering method used: Evaporation Location of fluid disposal if hauled offsite: Operator Name: _____ _____ License #: _____ Lease Name: ___ Quarter_____ Sec. _____ Twp.____S. R. ____ East West _____ 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.

Title: President of G&F Resources, Inc., Mgr. Date: 01-05-2011

KCC Office Use UNLY
Letter of Confidentiality Regeived Date: 1511 - 1512
Confidential Release Date:
Wireline Log Received
Geologist Report Received
UIC Distribution
ALT I II III Approved by: Date: