

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
October 2008
Form Must Be Typed

12/10/11

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 31885

Name: M & M Exploration, Inc.

Address 1: 60 Garden Center, Suite 102

Address 2: _____

City: Broomfield State: CO Zip: 80020 + _____

Contact Person: Mike Austin

Phone: (303) 438-1991

CONTRACTOR: License # 33350

Name: Southwind Drilling LLC

Wellsite Geologist: Mike Pollok

Purchaser: ONEOK

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.: _____

August 30, 2010 Sept. 7, 2010 Oct. 8, 2010

Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date
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API No. 15 - 007235830000

Spot Description: _____

E/2 SW NE SE Sec. 35 Twp. 33 S. R. 15 East West

1605 Feet from North / South Line of Section

685 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE NW SE SW

County: Barber

Lease Name: Z Bar Well #: 35-9

Field Name: Aetna Gas Area

Producing Formation: _____

Elevation: Ground: 1750' Kelly Bushing: 1759'

Total Depth: 5100' Plug Back Total Depth: 5072'

Amount of Surface Pipe Set and Cemented at: 306 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: _____ ppm Fluid volume: _____ bbls

Dewatering method used: _____

Location of fluid disposal if hauled offsite: _____

Operator Name: _____

Lease Name: _____ License No.: _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West

County: _____ Docket No.: _____

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.

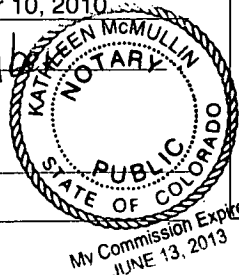
Signature: [Handwritten Signature]

Title: President Date: December 10, 2010

Subscribed and sworn to before me this 10th day of December

Notary Public: Kathleen McMullen

Date Commission Expires: 6.13.2013



KCC Office Use ONLY

- Letter of Confidentiality Received 12/10/10 - 12/10/11
- If Denied, Yes Date: _____
- Wireline Log Received
- Geologist Report Received
- _____ UIC Distribution

RECEIVED

DEC 13 2010

KCC WICHITA