

**CONFIDENTIAL**

OIL & GAS CONSERVATION DIVISION

WELL COMPLETION FORM**WELL HISTORY - DESCRIPTION OF WELL & LEASE**Form Must Be Typed
Form must be Signed
All blanks must be FilledOPERATOR: License # 33476Name: FIML Natural Resources, LLCAddress 1: 410 17TH ST STE 900

Address 2: _____

City: DENVER State: CO Zip: 80202 + 4420Contact Person: Cassie ParksPhone: (303) 893-5073CONTRACTOR: License # 30606Name: Murfin Drilling Co., Inc.Wellsite Geologist: Jim MusgrovePurchaser: OneOk

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.): _____

If Workover/Re-entry: Old Well Info as follows:

Operator: FIML Natural Resources, LLCWell Name: Dearden 7B-18R-1931Original Comp. Date: 09/24/2009 Original Total Depth: 4657

- 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 #: _____09/28/2010 10/13/2010Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion DateAPI No. 15 - 15-171-20727-00-01

Spot Description: _____

E2 NW SW NE Sec. 18 Twp. 19 S. R. 31 East West1,650 Feet from North / South Line of Section2,100 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

 NE NW SE SWCounty: ScottLease Name: DEARDEN Well #: 7B-18R-1931Field Name: Hughoton NortheastProducing Formation: KriderElevation: Ground: 2971 Kelly Bushing: 2985Total Depth: 1657 Plug Back Total Depth: 2890Amount of Surface Pipe Set and Cemented at: 397 FeetMultiple Stage Cementing Collar Used? Yes NoIf yes, show depth set: 3007 FeetIf Alternate II completion, cement circulated from: 3007feet depth to: 0 w/ 445 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 #: _____

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

County: _____ Permit #: _____

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.

Submitted Electronically

KCC Office Use ONLY Letter of Confidentiality ReceivedDate: 12/21/2010 Confidential Release Date: _____ Wireline Log Received Geologist Report Received UIC DistributionALT I II III Approved by: NAOMI JAMES Date: 12/27/2010*Naomi*