



KANSAS CORPORATION COMMISSION 1048592

Form ACO-1

June 2009

CONFIDENTIAL

OIL & GAS CONSERVATION DIVISION

Form Must Be Typed
Form must be Signed
All blanks must be Filled

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 3882

Name: Samuel Gary Jr. & Associates, Inc.

Address 1: 1515 WYNKOOP, STE 700

Address 2:

City: DENVER State: CO Zip: 80202 +

Contact Person: Tom Fertal

Phone: (303) 831-4673

CONTRACTOR: License # 5822

Name: Val Energy, Inc.

Wellsite Geologist: Tim Hedrick

Purchaser:

Designate Type of Completion:

[X] New Well [ ] Re-Entry [ ] Workover

[ ] Oil [ ] WSW [ ] SWD [ ] SIOW

[ ] Gas [X] 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:

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 #:

08/30/2010 09/06/2010 09/06/2010

Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 15-159-22621-00-00

Spot Description:

SE SW NE SW Sec. 6 Twp. 21 S. R. 10 [ ] East [X] West

1,350 Feet from [ ] North [X] South Line of Section

1,890 Feet from [ ] East [X] West Line of Section

Footages Calculated from Nearest Outside Section Corner:

[ ] NE [ ] NW [ ] SE [X] SW

County: Rice

Lease Name: WELLS TRUST Well #: 1-6

Field Name:

Producing Formation: N/A

Elevation: Ground: 1729 Kelly Bushing: 1739

Total Depth: 3477 Plug Back Total Depth:

Amount of Surface Pipe Set and Cemented at: 308 Feet

Multiple Stage Cementing Collar Used? [ ] Yes [X] 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: 58000 ppm Fluid volume: 1000 bbls

Dewatering method used: Hauled to Disposal

Location of fluid disposal if hauled offsite:

Operator Name: SAMUEL GARY JR & ASSOCIATES

Lease Name: MATTHAEI TRUST License #: 3882

Quarter SW Sec. 19 Twp. 9 S. R. 9 [ ] East [X] West

County: RICE Permit #: 1516521881000

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

[X] Letter of Confidentiality Received

Date: 12/22/2010

[ ] Confidential Release Date:

[X] Wireline Log Received

[X] Geologist Report Received

[ ] UIC Distribution

ALT [X] I [ ] II [ ] III Approved by: NAOMI JAMES Date: 12/29/2010

Handwritten signature