

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL RECEIVED
Form ACO-1
June 2009
Form Must Be Typed
Form must be Signed
All blanks must be Filled
JAN 13 2011
KCC WICHITA
1/12/12

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 5205
Name: Mid-Continent Energy Corporation
Address 1: 105 S. Broadway, Suite 360
Address 2: _____
City: Wichita State: KS Zip: 67202 + _____
Contact Person: Jack Buehler
Phone: (316) 265-9501
CONTRACTOR: License # 34233
Name: Maverick Drilling, Inc.
Wellsite Geologist: Ben Landes
Purchaser: SUNOCO

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JAN 12 2011
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API No. 15 - 185-23637-0006
Spot Description: _____
SW NW SW Sec. 33 Twp. 24 S. R. 13 East West
1,526 Feet from North / South Line of Section
363 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Stafford
Lease Name: Russell Well #: 1
Field Name: Haley
Producing Formation: Lansing
Elevation: Ground: 1938 Kelly Bushing: 1947
Total Depth: 4310 Plug Back Total Depth: 4124
Amount of Surface Pipe Set and Cemented at: 268 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.

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: _____
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 #: _____
10-5-2010 10-13-2010 10-26-2010
Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content: 15000 ppm Fluid volume: 240 bbls
Dewatering method used: settlement
Location of fluid disposal if hauled offsite:
Operator Name: Bob's Oil Service, Inc.
Lease Name: Teichman SWD License #: 32408
Quarter SW Sec. 16 Twp. 22 S. R. 12 East West
County: Stafford Permit #: D-23,722

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: Jack Buehler
Owner/Operator 1-12-2011

KCC Office Use ONLY
 Letter of Confidentiality Received
Date: 1/12/11 - 1/12/12
 Confidential Release Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution