



KANSAS CORPORATION COMMISSION 1049320  
OIL & GAS CONSERVATION DIVISION

Form ACO-1

June 2009

Form Must Be Typed

Form must be Signed

All blanks must be Filled

**CONFIDENTIAL**

**WELL COMPLETION FORM**

**WELL HISTORY - DESCRIPTION OF WELL & LEASE**

OPERATOR: License # 5316  
Name: Falcon Exploration, Inc.  
Address 1: 125 N MARKET STE 1252  
Address 2: \_\_\_\_\_  
City: WICHITA State: KS Zip: 67202 + 1719  
Contact Person: MICHEAL MITCHELL  
Phone: ( 316 ) 262-1378  
CONTRACTOR: License # 5142  
Name: Sterling Drilling Company  
Wellsite Geologist: MACK ARMSTRONG  
Purchaser: NCRA

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 #: \_\_\_\_\_

<u>10/02/2010</u>	<u>10/15/2010</u>	<u>11/18/2010</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-025-21518-00-00

Spot Description: \_\_\_\_\_

NE SW SW SW Sec. 3 Twp. 31 S. R. 22  East  West  
370 Feet from  North /  South Line of Section  
650 Feet from  East /  West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE     NW     SE     SW

County: Clark

Lease Name: GILES RANCH Well #: 3-3

Field Name: LIBERTY RIVER

Producing Formation: MORROW

Elevation: Ground: 2167 Kelly Bushing: 2176

Total Depth: 5460 Plug Back Total Depth: 5455

Amount of Surface Pipe Set and Cemented at: 266 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: 19400 ppm Fluid volume: 600 bbls

Dewatering method used: Hauled to Disposal

Location of fluid disposal if hauled offsite:

Operator Name: ROBERTS RESOURCES INC.

Lease Name: MARY License #: 32781

Quarter NE Sec. 16 Twp. 29 S. R. 18  East  West

County: KIOWA Permit #: D28396

**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 Received  
Date: 01/13/2011
- Confidential Release Date: \_\_\_\_\_
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT  I  II  III Approved by: NAOMI JAMES Date: 01/18/2011

*Red*