

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1

June 2009

Form Must Be Typed

Form must be Signed

All blanks must be Filled

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

1/24/11

OPERATOR: License # 34055
Name: H&M PETROLEUM CORPORATION
Address 1: 13570 MEADOWGRASS DRIVE SUITE 120
Address 2: _____
City: COLORADO SPRINGS State: CO Zip: 80921 + _____
Contact Person: SHANE BOILLOT
Phone: (719) 590-6060
CONTRACTOR: License # 33575
Name: WW DRILLING
Wellsite Geologist: CLAYTON ERICKSON
Purchaser: COFFEYVILLE RESOURCES

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 #: _____

| Spud Date or Recompletion Date | Date Reached TD | Completion Date or Recompletion Date |
|-----------------------------------|-----------------|---|
| 9/27/10 | 10/02/10 | 10/03/10 |

API No. 15 - 065-23680-00-00
Spot Description: _____
S2 SW NW Sec. 29 Twp. 9 S. R. 24 East West
2,310 Feet from North / South Line of Section
660 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: GRAHAM
Lease Name: BETTY THUNDER Well #: 1
Field Name: UNKNOWN
Producing Formation: LANSING
Elevation: Ground: 2553 Kelly Bushing: 2558
Total Depth: 4180 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 5 JTS@233' Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: 2214 Feet
If Alternate II completion, cement circulated from: 2214
feet depth to: SURFACE w/ 345 sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 1000 ppm Fluid volume: 200 bbls
Dewatering method used: EVAPORATION
Location of fluid disposal if hauled offsite: _____
Operator Name: _____
Lease Name: _____ License #: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
County: _____ Permit #: _____

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: _____
Title: LAND MGR Date: 1/19/11

KCC Office Use ONLY

Letter of Confidentiality Received
Date: 1/17/11 - 1/17/13
 Confidential Release Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
ALT I II III Approved by: _____ Date: _____

RECEIVED

JAN 24 2011

KCC WICHITA