

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

1/25/13

OPERATOR: License # 8966
Name: Mid Continent Resources, Inc
Address 1: P O Box 399
Address 2: _____
City: Garden City State: KS Zip: 67846 + _____
Contact Person: Kevin Wiles, Sr
Phone: (620) 275-2963
CONTRACTOR: License # 5822
Name: Val Energy, Inc
Wellsite Geologist: Roger L Fisher
Purchaser: N/A

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 #: _____

12/2/10 12/7/10 12/7/10
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 077-21, 725 - 0000Spot Description: NW-SE-NE-NENW SE NE NE Sec. 13 Twp. 34 S. R. 9 ☐ East ☒ West860 Feet from ☒ North / ☐ South Line of Section338 Feet from ☒ East / ☐ West Line of Section

Footages Calculated from Nearest Outside Section Corner:

☐ NE ☐ NW ☐ SE ☒ SWCounty: HarperLease Name: Patterson Well #: 3-13Field Name: WildcatProducing Formation: N/AElevation: Ground: 1308' Kelly Bushing: 1318'Total Depth: 4606' Plug Back Total Depth: N/AAmount of Surface Pipe Set and Cemented at: 355 FeetMultiple 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: 18,500 ppm Fluid volume: 95 bblsDewatering 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: Mil L...Title: Geologist Date: 1/24/11

KCC Office Use ONLY

- ☒ Letter of Confidentiality Received
Date: 1/25/11 - 1/25/13 JAN 25 2011
☐ Confidential Release Date: _____
☒ Wireline Log Received
☒ Geologist Report Received
☐ UIC Distribution
ALT ☐ I ☐ II ☐ III Approved by: _____ Date: _____