

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Form ACO-1
September 1999
Form Must Be Typed

ORIGINAL

3/4/11
AMENDED

Operator: License # 3882
Name: SAMUEL GARY JR. & ASSOCIATES, INC.
Address: 1560 BROADWAY, SUITE 2100
City/State/Zip: DENVER, CO 80202-4838
Purchaser: GARY-WILLIAMS ENERGY CORPORATION
Operator Contact Person: CLAYTON CAMOZZI
Phone: (303) 831-4673
Contractor: Name: SOUTHWIND DRILLING
License: 33350
Wellsite Geologist: JUSTIN CARTER

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SIOW Temp Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, 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./SWD
 Plug Back Plug Back Total Depth
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Enhr.?) Docket No. D-30,183

11/18/2008 11/24/2008 5/5/2010
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 15-009-25275-0000
County: BARTON
NW NW NE Sec. 35 Twp. 17 S. R. 12 East West
615 feet from NORTH Line of Section
2155 feet from EAST Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW

Lease Name: SCHNEWEIS Well #: 3-35
Field Name: WILDCAT
Producing Formation: ARBUCKLE
Elevation: Ground: 1843' Kelly Bushing: 1853'
Total Depth: 3599' Plug Back Total Depth: 3430'
Amount of Surface Pipe Set and Cemented at 710 Feet
Multiple State 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 AKINS 7-12-10
(Data must be collected from the Reserve Pit)
Chloride content _____ ppm Fluid volume _____ bbls

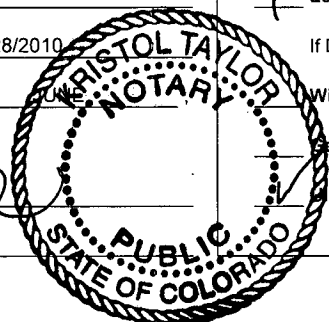
Dewatering method used _____
Location of fluid disposal if hauled offsite: _____
Operator Name: _____
Lease Name: _____ License No.: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
County: _____ Docket No.: _____

INSTRUCTIONS: An original and two copies of this information shall be filed with the Kansas Corporation Commission, 130 South 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 on 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.

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: [Signature]
Title: OPERATIONS ENGINEER Date: 6/28/2010

Subscribed and sworn to before me this 28TH day of JUNE 2009.
Notary Public: [Signature]
Date Commission Expires: _____



KCC Office Use ONLY
 Letter of Confidentiality Attached
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 C Distribution

My Commission Expires 05/11/2013

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7-1-10
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Operator Name: SAMUEL GARY JR & ASSOCIATES, INC. Lease Name: SCHNEWEIS Well #: 3-35
 Sec. 35 Twp. 17 S. R. 12 East West County: BARTON

INSTRUCTIONS: Show important tops and base of formation penetrated. Detail all cores. Report all final copes of drill stem tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface test, along with final chart(s). Attach extra sheet if more space is needed. Attach copy of all Electric Wireline Logs surveyed. Attach final geologist well site report.

Drill Stem Tests Taken (Attach Additional Sheets)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Sample Sent to Geological Survey	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	TOPEKA	2721'	-868'
Electric Log Run (Submit Copy)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	HEEBNER	2968'	-1115'
List All E. Logs Run:	DUAL INDUCTION	DOUGLAS	2994'	-1141'
	DENSITY - NEUTRON	BRN LIME	3069'	-1216'
	SONIC LOG	LANSING	3091'	-1238'
	MICROLOG	ARBUCKLE	3367'	-1514'
		TD	3599'	

CASING RECORD <input checked="" type="checkbox"/> New <input checked="" type="checkbox"/> Used							
Report all strings set - conductor, surface, intermediate, production, etc.							
Purpose of string	Size Hole Drilled	Size Casing Set (in O.D.)	Weight Lbs./Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
SURFACE	12-1/4"	8-5/8"	23	710'	CLASS A	375'	2% GEL & 3% CC
PRODUCTION	7-7/8"	5-1/2"	15.5	3449'	60/40 POZ ECON-O-BOND	25 125	5#/SK GILSONITE, 1/4#/SK CELLFLAKE

ADDITIONAL CEMENTING/SQUEEZE RECORD					
Purpose:	Depth		Type of Cement	# Sacks Used	Type and Percent Additives
	Top	Bottom			
<input type="checkbox"/> Perforate					
<input type="checkbox"/> Protect Casing					
<input type="checkbox"/> Plug Back TD					
<input type="checkbox"/> Plug Off Zone					

Shots per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated		Acid, Fracture, Shot, Cement, Squeeze Record (Amount and Kind of Material Used)		Depth
	4 JSPF	3370 - 3381'		500 GAL W/ 15% ACETIC	
			400 GAL W/ 15% MUD ACID W/ 3% MAS		

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TUBING RECORD		Size 2 7/8"	Set At 3437'	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr. 5/5/2010		Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)			
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
		0	0		

Disposition of Gas: Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled Other (Specify) _____

Production Interval: 3370 - 3381'