CONFIDENTIAL WELL COMPLETION FORM

1052222

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

OPERATOR: License # 33476		API No. 15
Name: FIML Natural Resources, LLC		Spot Description:
440 47TH CT CTC 000		_E2_NW_SW_NE Sec. 18 Twp. 19 S. R. 31 ☐ East 🗸 West
Address 2:		1,650 Feet from V North / South Line of Section
City: DENVER State: CO Zip:	80202 + 4420	2,100 Feet from 🗹 East / 🗌 West Line of Section
Contact Person: Cassie Parks		Footages Calculated from Nearest Outside Section Corner:
Phone: (303) 893-5073		✓ NE □NW □SE □SW
CONTRACTOR: License #30606		County: Scott
Name: Murfin Drilling Co., Inc.		Lease Name: DEARDEN Well #: 7B-18R-1931
Wellsite Geologist: Jim Musgrove		Field Name: Hughoton Northeast
Purchaser: OneOk		Producing Formation: Krider
Designate Type of Completion:		Elevation: Ground: 2971 Kelly Bushing: 2985
	Workover	Total Depth: 4657 Plug Back Total Depth: 2890
□ Oil □ WSW □ SWD	☐ slow	Amount of Surface Pipe Set and Cemented at: 397 Feet
✓ Gas D&A ENHR	SIGW	Multiple Stage Cementing Collar Used? ✓ Yes No
□ og □ gsw	Temp. Abd.	If yes, show depth set: 3007 Feet
CM (Coal Bed Methane)		If Alternate II completion, cement circulated from:
Cathodic Other (Core, Expl., etc.):		feet depth to: 0 w/ 445 sx cmt.
If Workover/Re-entry: Old Well Info as follows:		
Operator: FIML Natural Resouces, LLC		Delition Florid Management Disc
Well Name:		Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)
Original Comp. Date: 09/24/2009 Original Total	Depth: 4657	Chloride content:ppm Fluid volume:bbls
☐ Deepening		Dewatering method used:
Conv. to G	sw	Dewatering method used.
Plug Back: Plug Back Total Depth		Location of fluid disposal if hauled offsite:
Commingled Permit #:		Operator Name:
Dual Completion Permit #:		Lease Name: License #:
SWD Permit #:		
ENHR Permit #:		QuarterSecTwpS. R East West
GSW Permit #:	······································	County: Permit #:
09/28/2010	10/13/2010	
	Completion Date or Recompletion Date	

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:		
Confidential Release Date:		
Wireline Log Received		
Geologist Report Received		
UIC Distribution		
ALT I I II Approved by: NAOMI JAMES Date: 03/17/2011		