



KANSAS CORPORATION COMMISSION 1053024
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 # 5822
Name: Val Energy, Inc.
Address 1: 200 W DOUGLAS AVE STE 520
Address 2: _____
City: WICHITA State: KS Zip: 67202 + 3005
Contact Person: K TODD ALLAM
Phone: (316) 263-6688
CONTRACTOR: License # 5822
Name: Val Energy, Inc.
Wellsite Geologist: STEVE VAN BUSKIRK
Purchaser: MACLASKEY

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 #: _____

3/7/2011	3/15/2011	4/18/2011
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-007-23650-00-00
Spot Description: _____
SW NE NE NW Sec. 35 Twp. 34 S. R. 11 East West
545 Feet from North / South Line of Section
2,290 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Barber
Lease Name: BLEVINS Well #: 1-35
Field Name: _____
Producing Formation: MISSISSIPPI
Elevation: Ground: 1304 Kelly Bushing: 1315
Total Depth: 4840 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 206 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: 44000 ppm Fluid volume: 1800 bbls
Dewatering method used: Hauled to Disposal
Location of fluid disposal if hauled offsite:
Operator Name: VAL ENERGY
Lease Name: LEYSA 5-22 SWD License #: 5822
Quarter SW Sec. 22 Twp. 34 S. R. 11 East West
County: BARBER Permit #: D30724

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: 05/06/2011

Confidential Release Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

ALT I II III Approved by: NAOMI JAMES Date: 05/19/2011