

AMENDED

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

RECEIVED 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

KCC WICHITA

OPERATOR: License # 31234  
Name: FIDELITY ENERGY INC.  
Address 1: P.O. BOX 36  
Address 2: 202 SOUTH CHAUTAUQUA STREET  
City: SEDAN State: KS Zip: 67361 +  
Contact Person: WAYNE E BRIGHT  
Phone: ( 620 ) 725-3727  
CONTRACTOR: License # 5831  
Name: MOKAT  
Wellsite Geologist: NONE  
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 #: \_\_\_\_\_

| 6/4/2010                          | 6/8/2010        | 6/30/2010                               |
|-----------------------------------|-----------------|---|
| Spud Date or<br>Recompletion Date | Date Reached TD | Completion Date or<br>Recompletion Date |

API No. 15 - 15-125-31962-00-00  
Spot Description: \_\_\_\_\_  
E 1/2 NE NW SW Sec. 1 Twp. 33 S. R. 14  East  West  
2,310 Feet from  North /  South Line of Section  
4,198 Feet from  East /  West Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
 NE  NW  SE  SW  
County: MONTGOMERY  
Lease Name: SCOTT Well #: F-1  
Field Name: JEFFERSON/SYCAMERE  
Producing Formation: ROE COAL  
Elevation: Ground: 826'EST Kelly Bushing: N/A  
Total Depth: 1465' Plug Back Total Depth: \_\_\_\_\_  
Amount of Surface Pipe Set and Cemented at: 20' Feet  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set: \_\_\_\_\_ Feet  
If Alternate II completion, cement circulated from: 1540'  
feet depth to: SURFACE w/ 170 sx cm.

Drilling Fluid Management Plan  
(Data must be collected from the Reserve Pit)  
Chloride content: FRESH H2O ppm Fluid volume: 50 bbls  
Dewatering method used: VAC TRUCK  
Location of fluid disposal if hauled offsite:  
Operator Name: FIDELITY ENERGY INC.  
Lease Name: BRIGHT License #: \_\_\_\_\_  
Quarter NE 1/4 Sec. 9 Twp. 33 S. R. 15  East  West  
County: MONTGOMERY Permit #: D-24852

**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: Wayne E Bright  
Title: ABCNT Date: \_\_\_\_\_

KCC Office Use ONLY

Letter of Confidentiality Received  
Date: \_\_\_\_\_  
 Confidential Release Date: \_\_\_\_\_  
 Wireline Log Received  
 Geologist Report Received  
 UIC Distribution  
ALT  I  II  III Approved by: Dlg Date: 7/26/11

Operator Name: FIDELITY ENERGY INC. Lease Name: SCOTT Well #: F-1  
 Sec. 1 Twp. 33 S. R. 14  East  West County: MONTGOMERY

**INSTRUCTIONS:** Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems 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 complete copy of all Electric Wire-line Logs surveyed. Attach final geological well site report.

|   |  |
|---|--|
| Drill Stem Tests Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br><i>(Attach Additional Sheets)</i><br><br>Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br><br>Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>Electric Log Submitted Electronically <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br><i>(If no, Submit Copy)</i><br><br>List All E. Logs Run:<br><b>GAMMA RAY/ NUETRON</b> | <input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample<br><br>Name Top Datum<br>ROE 1309' |
|---|--|

| CASING RECORD <input type="checkbox"/> New <input 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"                    |                   | 20'           | PORTLAND       | 10           |                            |
| PRODUCTION  | 6 3/4"            | 4 1/2"                    | 10.5              | 1451"         | OWC            | 185          |                            |
|   |                   |                           |                   |               |                |              |                            |

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

| Shots Per Foot | PERFORATION RECORD - Bridge Plugs Set/Type<br>Specify Footage of Each Interval Perforated | Acid, Fracture, Shot, Cement Squeeze Record<br><i>(Amount and Kind of Material Used)</i> | Depth |
|----------------|---|--|-------|
| 4              | 1309'-1312'   | 200 GAL HYDROCLORIZ/4000#12-20 SAND  | 1309" |
|                |   |  |       |
|                |   |  |       |

|                |                    |                      |            |  |
|----------------|--------------------|----------------------|------------|--|
| TUBING RECORD: | Size: <u>2 3/8</u> | Set At: <u>1365"</u> | Packer At: | Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
|----------------|--------------------|----------------------|------------|--|

|   |  |                         |                              |                          |
|---|--|-------------------------|------------------------------|--------------------------|
| Date of First, Resumed Production, SWD or ENHR.<br><u>7/10/2010</u> | Producing Method:<br><input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) _____ |                         |                              |                          |
| Estimated Production Per 24 Hours                                   | Oil Bbls.  | Gas Mcf<br><u>12MCF</u> | Water Bbls.<br><u>10BRLS</u> | Gas-Oil Ratio<br>Gravity |

|   |   |  |
|---|---|--|
| DISPOSITION OF GAS:<br><input type="checkbox"/> Vented <input checked="" type="checkbox"/> Sold <input checked="" type="checkbox"/> Used on Lease<br><i>(If vented, Submit ACO-18.)</i> | METHOD OF COMPLETION:<br><input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled<br><i>(Submit ACO-5) (Submit ACO-4)</i><br><input type="checkbox"/> Other (Specify) _____ | PRODUCTION INTERVAL:<br><u>1309'-1312'</u> |
|---|---|--|