



CONFIDENTIAL

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 5663

Name: Hess Oil Company

Address 1: PO BOX 1009

Address 2:

City: MCPHERSON State: KS Zip: 67460 + 1009

Contact Person: Bryan Hess

Phone: (620) 241-4640

CONTRACTOR: License # 5663

Name: Hess Oil Company

Wellsite Geologist: Derek W. Patterson

Purchaser:

Designate Type of Completion:

- Checkboxes for completion types: New Well, Re-Entry, Workover, Oil, Gas, OG, CM, Cathodic, etc.

If Workover/Re-entry: Old Well Info as follows:

Operator:

Well Name:

Original Comp. Date: Original Total Depth:

- Checkboxes for completion changes: Deepening, Re-perf, Conv. to ENHR, Conv. to SWD, Conv. to GSW, Plug Back, Commingled, Dual Completion, SWD, ENHR, GSW

3/23/2011 3/30/2011 4/16/2011
Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

API No. 15 - 15-185-23674-00-00

Spot Description:

NW, NW, NE Sec. 7 Twp. 21 S. R. 14 East West

330 Feet from North / South Line of Section

2310 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- Checkboxes for corner footages: NE, NW, SE, SW

County: Stafford

Lease Name: Wood Well #: 1-7

Field Name:

Producing Formation: Arbuckle

Elevation: Ground: 1927 Kelly Bushing: 1932

Total Depth: 3842 Plug Back Total Depth:

Amount of Surface Pipe Set and Cemented at: 900 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: 0 ppm Fluid volume: 0 bbls

Dewatering method used: Evaporated

Location of fluid disposal if hauled offsite:

Operator Name:

Lease Name: License #:

Quarter Sec. Twp. S. R. East West

County: Permit #:

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

- Checkboxes for office use: Letter of Confidentiality Received, Confidential Release Date, Wireline Log Received, Geologist Report Received, UIC Distribution, ALT I II III, Approved by: NADMI JAMES Date: 06/28/2011