



KANSAS CORPORATION COMMISSION 1058917
OIL & GAS CONSERVATION DIVISION

Form ACO-1
June 2009

CONFIDENTIAL

WELL COMPLETION FORM

Form Must Be Typed
Form must be Signed
All blanks must be Filled

WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 33476
Name: FIML Natural Resources, LLC
Address 1: 410 17TH ST STE 900
Address 2: _____
City: DENVER State: CO Zip: 80202 + 4420
Contact Person: Cassie Parks
Phone: (303) 893-5073
CONTRACTOR: License # 6454
Name: Cheyenne Well Service, Inc.
Wellsite Geologist: NA
Purchaser: NCRA

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: FIML Natural Resources, LLC
Well Name: Meyers 4A-21-1931
Original Comp. Date: 12/29/2008 Original Total Depth: 4848
 Deepening Re-perf. Conv. to ENHR Conv. to SWD
 Conv. to GSW
 Plug Back: _____ Plug Back Total Depth _____
 Commingled Permit #: CO030902
 Dual Completion Permit #: _____
 SWD Permit #: _____
 ENHR Permit #: _____
 GSW Permit #: _____

05/16/2011 05/18/2011
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 15-171-20707-00-02
Spot Description: _____
SW NE NW NW Sec. 21 Twp. 19 S. R. 31 East West
375 Feet from North / South Line of Section
950 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Scott
Lease Name: Meyers Well #: 4A-21-1931
Field Name: _____
Producing Formation: Marmaton and Lansing
Elevation: Ground: 2962 Kelly Bushing: 2974
Total Depth: 4848 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 385 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: 2983 Feet
If Alternate II completion, cement circulated from: 2983
feet depth to: 0 w/ 540 sx cmt.

Drilling Fluid Management Plan

(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 #: _____
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

- Letter of Confidentiality Received
Date: 07/01/2011
- Confidential Release Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT I II III Approved by: NAOMI JAMES Date: 07/06/2011