

CONFIDENTIAL COMPLETION COMMISSION OIL & GAS CONSERVATION DIVISION WELL COMPLETION FORM

1057028

Form ACO-1 June 2009 Form Must Be Typed Form must be Signed All blanks must be Filted

WELL COMPLETION FORM WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 31819	API No. 15 - 15-039-21129-00-00
Name: Cholla Production, LLC	Spot Description:
Address 1: 7851 S ELATI ST STE 201	SW_NW_SE_NE Sec. 14 Twp. 2 S. R. 30 ☐ East West
Address 2:	Feet from V North / South Line of Section
Contact Person:Emily Hundley-Goff Phone: (303	Footages Calculated from Nearest Outside Section Corner: NE NW SE SW Ne Section Corner: Ne
☐ OG ☐ GSW ☐ Temp. Abd ☐ CM (Coal Bed Methane) ☐ Cathodic ☐ Other (Core, Expl., etc.):	If yes, show depth set: 2551 Feet If Alternate II completion, cement circulated from:
Well Name: Original Total Depth: Original Comp. Date: Original Total Depth: Original Total Depth: Onv. to S' Conv. to ENHR Conv. to S' Conv. to GSW Plug Back: Plug Back Total Depth Commingled Permit #: Dual Completion Permit #: SWD Permit #: Permit #: SWD Permit #: Permit #: GSW Permit #: Permit #: Permit #: SWD Permit #: Permit #: SWD Permit #:	(Data must be collected from the Reserve Pit) Chloride content: 26000 ppm Fluid volume: 1000 bbls Dewatering method used: Evaporated Location of fluid disposal if hauled offsite: Operator Name: License #: East Wes
03/21/2011 03/27/2011 06/11/2011	
Spud Date or Recompletion Date Oate Reached TD 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: 07/19/2011	
Confidential Release Date:	-
Wireline Log Received	
Geologist Report Received	
☐ UIC Distribution ALT ☑ I ☐ II ☐ Approved by: NAOMI JAMES Date: 107/20/20	<u> </u>