



CONFIDENTIAL

OIL & GAS CONSERVATION DIVISION

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

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 3882
 Name: Samuel Gary Jr. & Associates, Inc.
 Address 1: 1515 WYNKOOP, STE 700
 Address 2: _____
 City: DENVER State: CO Zip: 80202 + _____
 Contact Person: CLAYTON CAMOZZI
 Phone: (303) 831-4673
 CONTRACTOR: License # 31548
 Name: Discovery Drilling
 Wellsite Geologist: TIM HEDRICK
 Purchaser: GARY WILLIAMS ENERGY COMPANY

API No. 15 - 15-051-26100-00-00
 Spot Description: _____
W2 SE SW SE Sec. 36 Twp. 15 S. R. 16 East West
330 Feet from North / South Line of Section
1900 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
 County: Ellis
 Lease Name: BOXBERGER Well #: 3-36

Field Name: _____
 Producing Formation: LANSING
 Elevation: Ground: 1935 Kelly Bushing: 1943
 Total Depth: 3631 Plug Back Total Depth: _____
 Amount of Surface Pipe Set and Cemented at: 1042 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: 43000 ppm Fluid volume: 1000 bbls
 Dewatering method used: Hauled to Disposal
 Location of fluid disposal if hauled offsite: _____
 Operator Name: TDI, INC
 Lease Name: DREILING B License #: 4787
 Quarter SW Sec. 22 Twp. 14 S. R. 16 East West
 County: ELLIS Permit #: D25112

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 (Cora, 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 #: _____

<u>02/23/2011</u>	<u>03/03/2011</u>	<u>03/08/2011</u>
Spud Date or Recompletion Date	Date 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: 06/22/2011
 Confidential Release Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
 ALT I II III Approved by: NAOMI JAMES Date: 06/22/2011