1061193

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

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

OPERATOR: License # 33168
Name: Woolsey Operating Company, LLC
Address 1: 125 N MARKET STE 1000
Address 2:
City: WICHITA State: KS Zip: 67202 + 1729
Contact Person: DEAN PATTISSON
Phone: (316) 267-4379
CONTRACTOR: License # 33793
Name: H2 Drilling LLC
Wellsite Geologist: SCOTT ALBERG
Purchaser: BLUESTEM GAS MARKETING / PLAINS MARKETING

Designate Type of Completion:

- [x] New Well
- [ ] Re-Entry
- [ ] Workover

- [ ] Oil
- [ ] WSW
- [ ] SWD
- [ ] SIOW
- [ ] Gas
- [ ] D&A
- [ ] ENHR
- [ ] SIGW
- [x] 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 #:

4/12/2011	4/20/2011	5/24/2011
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-007-23680-00-00
Spot Description:
NE - NE - SE Sec. 36 Twp. 33 S. R. 11 [ ] East [x] West
2310 Feet from [ ] North / [x] South Line of Section
330 Feet from [x] East / [ ] West Line of Section
Footages Calculated from Nearest Outside Section Corner:
[ ] NE [ ] NW [x] SE [ ] SW
County: Barber
Lease Name: LUTHI GU Well #: 4
Field Name: KOCHIA
Producing Formation: MISSISSIPPIAN
Elevation: Ground: 1448 Kelly Bushing: 1457
Total Depth: 5125 Plug Back Total Depth:
Amount of Surface Pipe Set and Cemented at: 211 Feet
Multiple Stage Cementing Collar Used? [ ] Yes [x] 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: 65000 ppm Fluid volume: 900 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

- [x] Letter of Confidentiality Received
  Date: 08/10/2011
- [ ] Confidential Release Date:
- [x] Wireline Log Received
- [x] Geologist Report Received
- [ ] UIC Distribution

ALT [x] I [ ] II [ ] III Approved by: NAOMI JAMES Date: 08/11/2011