

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
October 2008
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

8/5/11

OPERATOR: License # 32384
Name: Comanche Resources Company
Address 1: 6520 N Western Avenue - Suite 300
Address 2: _____
City: Oklahoma City State: OK Zip: 73116 + _____
Contact Person: Laura Lea-Clayton
Phone: (405) 755-5900 ext.822
CONTRACTOR: License # 5929
Name: Duke Drilling Co., Inc.
Wellsite Geologist: Jim Spellman
Purchaser: _____

KCC
AUG 05 2010
CONFIDENTIAL

Designate Type of Completion:
 New Well _____ Re-Entry _____ Workover _____
_____ Oil _____ SWD _____ SIOW
 Gas _____ ENHR _____ SIGW
_____ CM (Coal Bed Methane) _____ Temp. Abd.
_____ Dry _____ Other _____
(Core, WSW, Expl., Cathodic, 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
_____ Plug Back: _____ Plug Back Total Depth
_____ Commingled _____ Docket No.: _____
_____ Dual Completion _____ Docket No.: _____
_____ Other (SWD or Enhr.?) _____ Docket No.: _____
05-03-10 05-13-10 7-9-10
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

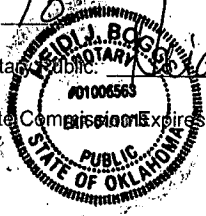
API No. 15-033-21570-00-00
Spot Description: SW/4 Sec 7. 31S. 19W
SE SE NW SW Sec. 7 Twp. 31 S. R. 19 East West
1582 Feet from North / South Line of Section
1075 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Comanche County, Kansas
Lease Name: PATRICIA Well #: 7-1
Field Name: Wildcat
Producing Formation: _____
Elevation: Ground: 2119' Kelly Bushing: 2132'
Total Depth: 5930' Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 370 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 AKI 1010-4-10
(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 No.: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
County: _____ Docket No.: _____

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form (see rule 82-3-107 for confidentiality in excess of 12 months). One copy of all wireline logs and geologist well report shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

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.

Signature: Laura Clayton
Title: Assistant Date: 8-5-10
Subscribed and sworn to before me this 6th day of August
20 10
Notary Public: [Signature]
Date Commission Expires: 4-18-13



KCC Office Use ONLY
 Letter of Confidentiality Received 8/5/10-8/5/11
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
_____ UIC Distribution

RECEIVED
AUG 13 2010
KCC WICHITA

Operator Name: Comanche Resources Company Lease Name: PATRICIA Well #: 7-1
 Sec: 7 Twp. 31 S. R. 19 East West County: Comanche County, Kansas

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface test, along with final chart(s). Attach extra sheet if more space is needed. Attach copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <i>(Attach Additional Sheets)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Heebner	4178 -2055
Electric Log Run <i>(Submit Copy)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Brown Line	4356 -2233
List All E. Logs Run: <u>5DDSN Micro, ACR & BS</u>		Stark	4676 -2553
		Marmaton	4830 -2707
		Altamont	4860 -2837
		Miss	5014 -2891
		Kinderhook	5648 -3525

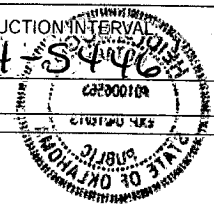
CASING RECORD <input checked="" type="checkbox"/> New <input type="checkbox"/> Used <u>Viola 5754 -3631</u>							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
Conductor		20"	48#	100'			
Surface	17-1/2"	13-3/8"	48#	370'	Premium Plus	360	2%gel
Production	7-7/8"	5-1/2"	17#	4928'	AA2	240	10%salt

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input checked="" type="checkbox"/> Plug Off Zone	5280		2	CIBP

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated		Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)		Depth
	2	5030-5446			
2	5060-5065		15% ACL		
N/A	5280		CIBP		
4	5414-5446		15% ACL		

TUBING RECORD:	Size: <u>23/8</u>	Set At: <u>4943</u>	Packer At: <u>4943</u>	Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr.	Producing Method: <input checked="" type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)			
<u>7-3-10</u>	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio Gravity
Estimated Production Per 24 Hours	<u>0</u>	<u>136</u>	<u>0</u>	

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input checked="" type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL <u>5414-5446</u> CIRCUIT NO. _____ DATE OF PERFORATION _____
--	---	---



BASIC

energy services, L.P.

KCC

AUG 05 2010

TREATMENT REPORT

Customer Comanche Exploration	Lease No. CONFIDENTIAL	Date 5-4-10			
Lease Patricia	Well # 7-1				
Field Order # 00740	Station Liberal, KS 1717	Casing 1.5" 48"	Depth 376	County Comanche	State KS
Type Job 242-133x Surface		Formation	Legal Description 7-31-19		

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME	
Casing Size 1.5"	Tubing Size	Shots/Ft 	Acid 360 sks Ch	RATE 2.33 gal/kc	PRESS 14.5	ISIP 10114 kpsi	
Depth 376	Depth	From	To	Pre Pad 1.34 A 3/4"	Max 2.33 gal/kc	5 Min	
Volume 54 bbls	Volume	From	To	Pad	Min 0.1	10 Min	
Max Press	Max Press	From	To	Frac	Avg	15 Min	
Well Connection	Annulus Vol.	From	To		HHP Used		Annulus Pressure
Plug Depth	Packer Depth	From	To	Flush fresh	Gas Volume		Total Load

Customer Representative Jim	Station Manager J. Bennett	Treater A. Olvera
Service Units 19816 19828 19883 27462		
Driver Names A. Olvera S. Linnz R. Cox		

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
3:00					on loc-site assessment (90' to cut)
3:10					spot trucks - rig in
11:30					safety meeting
11:40					pressure test 9 lines 1000#
11:45	100		86	4	start w/ mixing 360 sks @ 14.8
12:10	100		0	4	finish dmt, start disp
12:30	150		54	0	finish disp
					shut in since 17 bbls of slurry
					to surface
					job complete
					to surface
					tl

RECEIVED

AUG 13 2010

KCC WICHITA

BASIC

energy services, L.P.

KCC
AUG 05 2010

TREATMENT REPORT

Customer <i>Comanche Exploration</i>	Lease No. CONFIDENTIAL	Date <i>051410</i>
Lease <i>DeCija</i>	Well # <i>7-1</i>	
Field Order # <i>1539</i>	Station <i>PRATT</i>	Casing <i>5 1/2</i>
		Depth <i>5730</i>
Type Job <i>CNW 5 1/2 Longsway</i>	Formation	County <i>Comanche</i>
		State <i>KS</i>
		Legal Description <i>7-31-19</i>

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft		Acid	RATE	PRESS	ISIP	
<i>5 1/2</i>		<i>6 1/2</i>		Pre Pad	Max		5 Min.	
Depth <i>5730</i>	Depth	From	To	Pad	Min		10 Min.	
Volume <i>1300</i>	Volume	From	To	Frac	Avg		15 Min.	
Max Press <i>1500</i>	Max Press	From	To		HHP Used		Annulus Pressure	
Well Connection <i>P.C</i>	Annulus Vol.	From	To	Flush	Gas Volume		Total Load	
Plug Depth <i>3870</i>	Packer Depth	From	To					

Customer Representative	Station Manager <i>DAVE SCOTT</i>	Treater <i>Robert Sullivan</i>
Service Units <i>19867 19959 20920 19828 198E3 19907</i>		
Driver Names <i>Sullivan Molsod Victor Vosjan Kover</i>		

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
<i>2300</i>					<i>on loc safety meeting</i>
					<i>Run 5 1/2 csg</i>
<i>0400</i>					<i>CASING ON BOTTOM</i>
<i>0410</i>					<i>Hook Rig to circ csg</i>
<i>0455</i>	<i>250</i>		<i>12</i>	<i>5</i>	<i>Start Super Flush</i>
<i>0</i>			<i>3</i>		<i>1st SPACER</i>
<i>0510</i>			<i>69</i>	<i>6</i>	<i>mix cont 240 sk AA-2 cont</i>
					<i>cont mixed shut down with pump, line</i>
<i>0523</i>				<i>7</i>	<i>Retoss Plug</i>
	<i>350</i>		<i>92</i>		<i>1st Pump</i>
	<i>700</i>		<i>120</i>	<i>6</i>	<i>lift P.</i>
<i>0545</i>	<i>1400</i>		<i>130</i>	<i>4.5</i>	<i>Slow Rate</i>
			<i>7</i>		<i>Plug down</i>
			<i>9</i>		<i>plug R.H w/ 30 sk</i>
					<i>plug m.H. w/ 20 sk</i>

RECEIVED

AUG 13 2010

Job Complete
[Signature]

KCC WICHITA

CEMENTING REPORT

This form shall be filed with the Completion Report, (Form 1002A). The signature on this statement must be that of qualified employees of the cementing company and operator to demonstrate compliance with OAC 165:10-3-4(i). It may be advisable to take a copy of this form to location when cementing work is performed.

TYPE OR USE BLACK INK ONLY

*Field Name Wildcat		033-21570	
*Operator Comanche Exploration		32384	
*Well Name/No. Patricia 7-1		County Comanche Co KS	
*Location 1/4 1/4 1/4 1/4	Sec 7	Twp 31 S	Rge 19 W

Cement Casing Data	Conductor Casing	Surface Casing	Alternative Casing	Intermediate Casing	Production String	Liner
Cementing Date	4-21-10					
*Size of Drill Bit (Inches)						
*Estimated % wash or hole enlargement used in calculations						
*Size of Casing (inches O.D.)	20"					
*Top of Liner (if liner used) (ft.)						
*Setting Depth of Casing (ft.) from ground level	100'					
Type of Cement (API Class)	10 SAK					
In first (lead) or only slurry	grout					
In second slurry						
In third slurry						
Sacks of Cement Used	12 1/2					
In first (lead) or only slurry						
In second slurry						
In third slurry						
Vol of slurry pumped (Cu ft)(14.X15.) in first (lead) or only slurry						
In second slurry						
In third slurry						
Calculated Annular Height of Cement behind Pipe (ft)						
Cement left in pipe (ft)	0					

*Amount of Surface Casing Required (from Form 1000)	ft.
---	-----

*Was cement circulated to Ground Surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	*Was Cement Staging Tool (DV Tool) used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
*Was Cement Bond Log run? Yes <input checked="" type="checkbox"/> No (If so, Attach Copy)	*If Yes, at what depth? ft.

CEMENTING COMPANY AND OPERATOR MUST COMPLY WITH THE INSTRUCTIONS ON REVERSE SIDE OF FORM

* Designates items to be completed by Operator.
Items not so designated shall be completed by the Cementing Company.

RECEIVED
SEP 02 2010
KCC WICHITA

Remarks

Remarks

CEMENTING COMPANY

OPERATOR

I declare under applicable Corporation Commission rule, that I am authorized to make this certification, that the cementing of casing in this well as shown in the report was performed by me or under my supervision, and that the cementing data and facts presented on both sides of this form are true, correct and complete to the best of my knowledge. This certification covers cementing data only.

I declare under applicable Corporation Commission rule, that I am authorized to make this certification, that I have knowledge of the well data and information presented in this report, and that data and facts presented on both sides of this form are true, correct and complete to the best of my knowledge. This certification covers all well data and information presented herein.

Tina Wheeler

Signature of Cementer or Authorized Representative

L. Clayton

Signature of Operator or Authorized Representative

Name & Title Printed or Typed	
Cementing Company	
Wildcat Drilling	
Address	
605 Martin Rd	
City	
Woodward	
State	Zip
OKIA	73801
Telephone (AC) Number	
580-254-3306	
Date	
8-25-10	

Name & Title Printed or Typed	
L. Clayton Assist.	
Operator	
Comanche Res. Co.	
Address	
6520 N. Western St. 300	
City	
OKC	
State	Zip
OK	73116
Telephone (AC) Number	
405 755 5900	
Date	
8-26-10	

RECEIVED
SEP 02 2010
KCC WICHITA

Wildcat Drilling Services, Inc.
P.O. BOX 905 Woodward, OK 73802
580-216-9569

I N V O I C E

COPY

Bill To
COMANCHE EXPLORATION 6520 N. WESTERN AVE., STE 300 OKLAHOMA CITY, OK 73116

Date	Invoice #	Ordered By	Lease Name	Rig	Terms	EIN #
4/21/2010	7497		Patricia 7-1	Duke #7	Net 30	16-1658674
Item	Qty	Description				
Drill & Set Conductor Pipe Hole	100	Drilled 100' of 30"				
20' Pipe	100	Set 100' of 20"				
Grout	12.5	12.5 yds of 10 Sack Grout				
R/M		Drilled Rat & Mouse Holes				
5x5 Cellar		Set 5X5 Cellar				
Weld		Weld				
Mud Truck		Mud Truck				
Mud		Mud				
Grout Pump		Grout Pump				
Shuck 15X35'		15X35' 16GA CSP				
		SUBTOTAL			14,537.00	
				Subtotal		\$14,537.00
				Sales Tax (5.3%)		\$427.29
				Total		\$14,964.29

RECEIVED
 SEP 02 2010
 KCC WICHITA