

ORIGINAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

RECEIVED

SEP 28 2011

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Form ACO-1
June 2009

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

OPERATOR: License # 30525
Name: D.S. LANGSTON
Address 1: 310 W. CENTRAL, STE. #202
Address 2: _____
City: WICHITA State: KS Zip: 67202 + 1004
Contact Person: D.S. LANGSTON
Phone: (620) 786-0874
CONTRACTOR: License # 33350
Name: SOUTHWIND DRILLING, INC.
Wellsite Geologist: BRUCE ARD
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: SAME
Well Name: SAME
Original Comp. Date: 4/04/2011 Original Total Depth: 3598
 Deepening Re-perf. Conv. to ENHR Conv. to SWD
 Conv. to GSW
 Plug Back: 3190 Plug Back Total Depth
 Commingled Permit #: _____
 Dual Completion Permit #: _____
 SWD Permit #: _____
 ENHR Permit #: _____
 GSW Permit #: _____

3/28/2011 4/04/2011 8/10/2011
Spud Date or Date Reached TD ~~Completion Date~~ or
Recompletion Date Recompletion Date

API No. 15 - 159-22641-00-0001
Spot Description: _____
N/2NW Sec. 33 Twp. 21 S. R. 9 East West
610 Feet from North / South Line of Section
1,380 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: RICE
Lease Name: WELLMAN B Well #: B-3
Field Name: UNNAMED
Producing Formation: WAS SIMPSON & MISENER SANDS; NOW L-KC
Elevation: Ground: 1692 Kelly Bushing: 1698
Total Depth: 3598 Plug Back Total Depth: 3190
Amount of Surface Pipe Set and Cemented at: 260 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: 63000 ppm Fluid volume: 1000 bbls
Dewatering method used: ALLOWED TO EVAPORATE
Location of fluid disposal if hauled offsite:
Operator Name: N/A because it evaporated away
Lease Name: N/A License #: N/A
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
County: _____ Permit #: _____

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.

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.

Signature: _____

Title: Ind. Oil & Gas Oper Date: 9/27/11

KCC Office Use ONLY

- Letter of Confidentiality Received
Date: _____
- Confidential Release Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT I II III Approved by: Dlc Date: 9/29/11

Operator Name: D.S. LANGSTON Lease Name: WELLMAN B Well #: B-3
 Sec. 33 Twp. 21 S. R. 9 East West County: RICE

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 complete copy of all Electric Wire-line Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Submitted Electronically <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run: GRT.,CNT.,LDT.,PIT., MICRO-LOG,X-Y CALIPER	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>LANSING</td> <td>3000</td> <td>-1302</td> </tr> <tr> <td>BKC</td> <td>3286</td> <td>-1588</td> </tr> <tr> <td>KINDERHOOK(MISENER) SAND</td> <td>3368</td> <td>-1670</td> </tr> <tr> <td>VIOLA</td> <td>3462</td> <td>-1764</td> </tr> <tr> <td>SIMPSON SAND</td> <td>3526</td> <td>-1828</td> </tr> <tr> <td>ARBUCKLE</td> <td>3589</td> <td>-1891</td> </tr> <tr> <td>TD</td> <td>3598</td> <td>-1900</td> </tr> </table>	Name	Top	Datum	LANSING	3000	-1302	BKC	3286	-1588	KINDERHOOK(MISENER) SAND	3368	-1670	VIOLA	3462	-1764	SIMPSON SAND	3526	-1828	ARBUCKLE	3589	-1891	TD	3598	-1900
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CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> Used							
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
SURFACE	12 1/2	8 5/8	23#	260	60/40 POZ	220 SX.	2 % GEL, 3% C.C.
PRODUCTION	7	5 1/2	14#	3588	60/40 POZ	175 SX.	2% GEL, 10% SALT, 3/4% CFR

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 checked="" type="checkbox"/> Plug Back TD <input checked="" type="checkbox"/> Plug Off Zone	3093-3103	CLASS A COMMON	200 SX.	ALSO REFERENCED BELOW AS THE 8/08/2011 SQUEEZE JOB
	W/ CIBP @ 3190			AND WHICH SQZ. JOB WAS THEREAFTER DRILLED OUT 8/10/2011

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth
	ORIG. (4/18/2011) SHOT 3366-76, 3380-89 1/2	500 GAL. 10% HCL & 450 DIESEL, 1000 GAL 7 1/2 HCL	ALL PERFS.
	ORIG. (4/18/2011) SHOT-3530-37	500 GAL. 10% HCL, 1200 GAL. 7 1/2% HCL W/ 25 BALLS	ALL PERFS.
7/19/2011	SET RETV. PLUG @ 3146 SHOT3093-3103	WATER BROKE IN AFTER ACIDIZED W/ 1500GAL	ALL PERFS.
8/08/2011	SET CIBP @ 3190 & SQZED OFF NEW ABOVE PERFS	200 SX. CLASS A COMMON CEMENT	
8/10/2011	DRILD OUT CEMENT, THEN PERF. "D" ZONE OF KC @ 3046-52	500 GAL. HCL, 1500 GAL. 15% HCL	ALL PERFS

TUBING RECORD: Size: <u>2 7/8</u> Set At: <u>3050</u> Packer At: <u>CIBP BELOW 3190'</u> Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Date of First, Resumed Production, SWD or ENHR. <u>8/11/2011</u>	Producing Method: <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input checked="" type="checkbox"/> Other (Explain) <u>INITIALLY THE PULLING UNIT SWABBED</u>
Estimated Production Per 24 Hours	Oil Bbls. <u>10.5</u> Gas Mcf <u>10</u> Water Bbls. <u>5</u> Gas-Oil Ratio <u>1.2 TO 1</u> Gravity <u>40</u>

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input checked="" 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 <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: <u>3046-3052</u>
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