



KANSAS CORPORATION COMMISSION 1063445  
 OIL & GAS CONSERVATION DIVISION

Form ACO-1  
 June 2009

**CONFIDENTIAL**

**WELL COMPLETION FORM**

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

**WELL HISTORY - DESCRIPTION OF WELL & LEASE**

OPERATOR: License # 31938  
 Name: Indian Oil Co., Inc.  
 Address 1: PO BOX 209  
 Address 2: 2507 SE US 160 HWY  
 City: MEDICINE LODGE State: KS Zip: 67104 + 0209  
 Contact Person: Anthony Farrar  
 Phone: (620) 886-3763  
 CONTRACTOR: License # 5822  
 Name: Val Energy, Inc.  
 Wellsite Geologist: Scott Alberg  
 Purchaser: Sunoco

API No. 15 - 15-007-23730-00-00  
 Spot Description: \_\_\_\_\_  
 NW NW SE NW Sec. 16 Twp. 32 S. R. 12  East  West  
1625 Feet from  North /  South Line of Section  
1630 Feet from  East /  West Line of Section

Footages Calculated from Nearest Outside Section Corner:  
 NE  NW  SE  SW  
 County: Barber  
 Lease Name: Captain Well #: 1  
 Field Name: Unnamed  
 Producing Formation: Mississippi

Elevation: Ground: 1585 Kelly Bushing: 1786  
 Total Depth: 4803 Plug Back Total Depth: 4613  
 Amount of Surface Pipe Set and Cemented at: 270 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 crnt.

Designate Type of Completion:  
 New Well  Re-Entry  Workover  
 Oil  WSW  SWD  SLOW  
 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: \_\_\_\_\_

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>07/11/2011</u>	<u>07/18/2011</u>	<u>09/06/2011</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

**Drilling Fluid Management Plan**  
 (Data must be collected from the Reserve Pit)  
 Chloride content: 5000 ppm Fluid volume: 1500 bbls  
 Dewatering method used: Hauled to Disposal  
 Location of fluid disposal if hauled offsite:  
 Operator Name: Bemco  
 Lease Name: Mac SWD License #: 32613  
 Quarter NW Sec. 7 Twp. 32 S. R. 11  East  West  
 County: Barber Permit #: 15-007-21428

**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: 09/27/2011

Confidential Release Date: \_\_\_\_\_

Wireline Log Received

Geologist Report Received

UIC Distribution

ALT  I  II  III Approved by: NAOMI JAMES Date: 10/03/2011