



KANSAS CORPORATION COMMISSION 1063762
OIL & GAS CONSERVATION DIVISION

Form ACO-1
June 2009

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

CONFIDENTIAL

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 5003
Name: McCoy Petroleum Corporation
Address 1: 8080 E CENTRAL STE 300
Address 2: _____
City: WICHITA State: KS Zip: 67206 + 2366
Contact Person: Scott Hampel
Phone: (316) 636-2737
CONTRACTOR: License # 30606
Name: Murfin Drilling Co., Inc.
Wellsite Geologist: Larry Nicholson
Purchaser: MVPurchasing

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: _____

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 #: Pending
 Dual Completion Permit #: _____
 SWD Permit #: _____
 ENHR Permit #: _____
 GSW Permit #: _____

<u>7/10/2011</u>	<u>7/16/2011</u>	<u>8/29/2011</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-163-23964-00-00
Spot Description: 165'E of SE SW NW
E2_SE_SW_NW Sec. 3 Twp. 7 S. R. 19 East West
2310 Feet from North / South Line of Section
1155 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Rooks
Lease Name: KST 'A' Well #: 1-3
Field Name: Wildcat
Producing Formation: LKC.I,J,K, Arbuckle
Elevation: Ground: 2002 Kelly Bushing: 2007
Total Depth: 3508 Plug Back Total Depth: 3453
Amount of Surface Pipe Set and Cemented at: 220 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: 1482 Feet
If Alternate II completion, cement circulated from: 1482
feet depth to: 0 w/ 200 sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 36000 ppm Fluid volume: 850 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

- Letter of Confidentiality Received
Date: 10/03/2011
- Confidential Release Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT I II III Approved by: NAOMI JAMES Date: 10/04/2011