

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
October 2008
Form Must Be Typed

9/29/11

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 4767
 Name: Ritchie Exploration, Inc.
 Address 1: P.O. Box 783188
 Address 2: _____
 City: Wichita State: KS Zip: 67278 + 3118
 Contact Person: John Niernberger
 Phone: (316) 691-9500
 CONTRACTOR: License # 30606
 Name: Murfin Drilling, Co., Inc.
 Wellsite Geologist: Terry McLeod
 Purchaser: NCRA
 Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SLOW
 Gas ENHR SIGW
 CM (Coal Bed Methane) Temp. Abd.
 Dry Other _____
 (Core, WSW, Expl., Cathodic, etc.)

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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.: _____

<u>7/6/09</u>	<u>7/17/09</u>	<u>7/17/09</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 063-21788-00-00
 Spot Description: 140' W
 C NW NE SE SW Sec. 29 Twp. 13 S. R. 31 East West
660 Feet from North / South Line of Section
2120 Feet from East / West Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
 County: Gove
 Lease Name: Hess 29A Well #: 1
 Field Name: _____
 Producing Formation: LKC & Johnson
 Elevation: Ground: 2870 Kelly Bushing: 2875
 Total Depth: 4576 Plug Back Total Depth: 4536'
 Amount of Surface Pipe Set and Cemented at: 217 Feet
 Multiple Stage Cementing Collar Used? Yes No
 If yes, show depth set: 2339 Feet
 If Alternate II completion, cement circulated from: surface
 feet depth to: 2339 w/ 350 sx cmt.

Drilling Fluid Management Plan ATTN 10-28-09
 (Data must be collected from the Reserve Pit)
 Chloride content: 31000 ppm Fluid volume: 1000 bbls
 Dewatering method used: evaporation
 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: _____
 Title: Production Manager Date: 9/29/09
 Subscribed and sworn to before me this 29th day of September,
20 09.
 Notary Public: Debra K Phillips
 Date Commission Expires: 5-4-11

KCC Office Use ONLY

Letter of Confidentiality Received
 If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

 **DEBRA K. PHILLIPS**
 Notary Public - State of Kansas
 My Appt. Expires 5-4-11

Operator Name: Ritchie Exploration, Inc. Lease Name: Hess 29A Well #: 1
 Sec. 29 Twp. 13 S. R. 31 East West County: Gove

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 <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 <i>(Submit Copy)</i> List All E. Logs Run: Dual Induction Log Compensated Density/Neutron Log	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input checked="" type="checkbox"/> Sample Name Top Datum SEE ATTACHED <div style="text-align: right;"> KCC SEP 29 2009 CONFIDENTIAL </div> <div style="text-align: center;"> RECEIVED SEP 30 2009 </div>
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CASING RECORD <input checked="" 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	12-1/4	8-5/8	23	217	common	150	3%cc, 2%gel
Production	7-7/8	5-1/2	15.5	4570	ASC	200	10% salt, 2% gel & 3/4% CD-31

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 type="checkbox"/> Plug Off Zone				

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
4	3961.3'-3963.3' (7/31/09)	500 gals 15% NE	
4	4465' - 4469' (8/4/09)		

TUBING RECORD: Size: <u>2-7/8</u> Set At: <u>4521'</u> <u>4537'</u> Packer At: _____ Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr. <u>8/10/09</u> Producing Method: <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
Estimated Production Per 24 Hours: Oil <u>3.80</u> Bbls. Gas <u>Mcf</u> Water <u>43.90</u> Bbls. Gas-Oil Ratio _____ Gravity <u>40</u>

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input 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 type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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#1 Hess 29A
 660' FNL & 2120' FEL
 140' W of C NW NE Section 29-13S-31W
 Gove County, Kansas
 API# 15-063-21788-0000
 Elevation: 2870' GL: 2875' KB

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Sample Tops			Ref. Well
Anhydrite	2354'	+521	-1
B/Anhydrite	2380'	+495	-3
Heebner	3865'	-990	+1
Lansing	3905'	-1030	+4
Lansing "C"	3941'	-1066	+4
Lansing "D"	3958'	-1083	+7
Muncie Shale	4059'	-1184	-2
Lansing "H"	4075'	-1200	-2
Lansing "I"	4101'	-1226	+4
Lansing "J"	4121'	-1246	+1
Stark Shale	4141'	-1266	+2
BKC	4221'	-1346	+8
Marmaton	4249'	-1374	+1
Altamont	4269'	-1394	+7
Pawnee	4344'	-1469	+7
Myric Station	4376'	-1502	+9
Fort Scott	4396'	-1521	+11
Cherokee Shale	4423'	-1548	+8
Johnson	4467'	-1592	+7
B/Johnson	4485'	-1610	+10
Morrow Sand	4491'	-1616	N/A
Mississippian	4510'	-1635	+8
RTD	4575'	-1700	

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ALLIED CEMENTING CO., LLC. 043677

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:
Oakley, KS

DATE <u>7-17-09</u>	SEC. <u>29</u>	TWP. <u>13</u>	RANGE <u>3W</u>	CALLED OUT	ON LOCATION <u>10:30am</u>	JOB START <u>2:30pm</u>	JOB FINISH <u>4:30pm</u>
LEASE <u>Hess 29-A</u>	WELL# <u>#1</u>	LOCATION <u>Oakley 115-40-35</u>		COUNTY <u>Good</u>	STATE <u>KS</u>		
OLD OR NEW (Circle one) <u>NEW</u>				<u>1/2 @ Sun</u>			

CONTRACTOR <u>Murphy #24</u>	OWNER <u>-</u>
TYPE OF JOB <u>Production string</u>	
HOLE SIZE <u>7 1/2</u>	T.D. <u>4575'</u>
CASING SIZE <u>5 1/2 15.5</u>	DEPTH <u>4570'</u>
TUBING SIZE	DEPTH
DRILL PIPE	DEPTH
TOOL	DEPTH
PRES. MAX	MINIMUM
MEAS. LINE	SHOE JOINT <u>20'</u>
CEMENT LEFT IN CSG.	<u>20'</u>
PERFS.	
DISPLACEMENT <u>108.7</u>	

EQUIPMENT	
PUMP TRUCK # <u>423</u>	CEMENTER <u>Fuzzie</u>
	HELPER <u>Kelly</u>
BULK TRUCK # <u>377</u>	DRIVER <u>Larson</u>
BULK TRUCK #	DRIVER

REMARKS:

mix 500gal WFA II 20sk in mix
30sk in Rt. mix 2000ks down csg.
Washed pump lines. Displace
plug to insert 1 1/2" 900#
band 1400# Insert held
plus down @ 4:30 pm
Good circulation all thru
Thanks Fuzzie crew

CEMENT	AMOUNT ORDERED <u>250 ASC 2900</u>
	<u>109 gal salt 3/4 900#-31</u>
	<u>5# G-1/SK 500gal WFA II</u>
COMMON	@
POZMIX	@
GEL	<u>5 @ 2000 wf</u>
CHLORIDE	@
ASC	<u>250 @ 1800 4650.00</u>
Salt	<u>23sk @ 2395 n/c</u>
CD-31	<u>176# @ 935 1645.00</u>
WFA II	<u>500gal @ 127 635.00</u>
Gilsonite	<u>1250 @ .89 1112.50</u>
HANDLING	<u>320 @ 2.40 768.00</u>
MILEAGE <u>10.5sk mile</u>	<u>640.00</u>
TOTAL	<u>9450.50</u>

SERVICE

DEPTH OF JOB	
PUMP TRUCK CHARGE	<u>2185.00</u>
EXTRA FOOTAGE	@ <u>110.00</u>
MILEAGE <u>20</u>	@ <u>700 700.00</u>
MANIFOLD	@
	@
	@
TOTAL	<u>2325.00</u>

PLUG & FLOAT EQUIPMENT

1- Port collar		<u>1751.00</u>
1- AFU Insert	@	<u>112.00</u>
1- G. shoe	@	<u>101.00</u>
1- Basket (W)	@	<u>186.00</u>
8- Turbolizers	@ <u>42.00</u>	<u>336.00</u>
3- Baskets	@ <u>161.00</u>	<u>483.00</u>
1- rubber plug		<u>43.00</u>
TOTAL		<u>3012.00</u>

CHARGE TO: Reichle Exploration
STREET _____
CITY _____ STATE _____ ZIP _____

To Allied Cementing Co., LLC.
You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME _____

SIGNATURE Thomas AAA

SALES TAX (If Any) _____
TOTAL CHARGES _____
DISCOUNT _____ IF PAID IN 30 DAYS

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ALLIED CEMENTING CO., LLC. 043565

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:
Oakley KS

7-6-09	SEC. 29	TWP. 13	RANGE 31	CALLED OUT	ON LOCATION 4:30pm	JOB START 6:00pm	JOB FINISH 6:30pm
DATE							
LEASE 290	WELL# 1	LOCATION OARLEY 115-46-35			COUNTY Gove	STATE KS	
OLD OR NEW (Circle one)				1126-500			

CONTRACTOR Precision Drllg
 TYPE OF JOB SunSare
 HOLE SIZE 12"4 T.D. 223'
 CASING SIZE 8 9/8 23 DEPTH 213
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE _____ DEPTH _____
 TOOL _____ DEPTH _____
 PRES. MAX _____ MINIMUM _____
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG. 15'
 PERFS. _____
 DISPLACEMENT 12.6

OWNER _____
 CEMENT AMOUNT ORDERED 150sk 10m 39orc 290gal

EQUIPMENT
 PUMP TRUCK CEMENTER Fuzz4
 # 431 HELPER Walt
 BULK TRUCK
 # 347 DRIVER Darren
 BULK TRUCK
 # _____ DRIVER _____

COMMON	<u>150</u>	@	<u>1545</u>	<u>2317.50</u>
POZMIX		@		
GEL	<u>3</u>	@	<u>20.00</u>	<u>62.40</u>
CHLORIDE	<u>5</u>	@	<u>58.20</u>	<u>291.00</u>
ASC		@		
HANDLING	<u>158</u>	@	<u>2.40</u>	<u>379.20</u>
MILEAGE	<u>1049.4</u>	@		<u>316.00</u>
TOTAL				<u>3366.10</u>

REMARKS:
Cement did circulate
Sub complete @ 6:30pm
Thanks Fuzz4 & crew

SERVICE

DEPTH OF JOB	<u>213'</u>
PUMP TRUCK CHARGE	<u>1018</u>
EXTRA FOOTAGE	@
MILEAGE	<u>20 @ 7.00 = 140.00</u>
MANIFOLD	@

CHARGE TO: Rivok Exploration
 STREET _____
 CITY _____ STATE _____ ZIP _____

TOTAL 1158.00

PLUG & FLOAT EQUIPMENT

	@	
	@	
	@	
	@	
	@	
TOTAL _____		

To Allied Cementing Co., LLC.
 You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

SALES TAX (If Any) _____
 TOTAL CHARGES _____
 DISCOUNT _____ IF PAID IN 30 DAYS

PRINTED NAME _____
 SIGNATURE [Signature]

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 KCC WICHITA

ALLIED CEMENTING CO., LLC. 043681

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:
OAKLEY KS

7-21-09	SEC. 29	TWP. 19	RANGE 31W	CALLED OUT	ON LOCATION 10:30am	JOB START 10:30am	JOB FINISH 11:30am
Hess	LEASE 29-A	WELL# 41	LOCATION Oakley 115-46-35			COUNTY Gove	STATE KS
OLD OR NEW (Circle one)			1 1/2 E. 5 in				

CONTRACTOR Express Well Service OWNER _____
 TYPE OF JOB Pont Collar
 HOLE SIZE _____ T.D. _____
 CASING SIZE 5 1/2 IS.5 DEPTH _____
 TUBING SIZE 2 7/8 DEPTH 3838'
 DRILL PIPE _____ DEPTH _____
 TOOL _____ DEPTH _____
 PRES. MAX _____ MINIMUM _____
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG. _____
 PERFS. _____
 DISPLACEMENT 13.5

EQUIPMENT

PUMP TRUCK CEMENTER Fuzzy
 # 431 HELPER Kelly
 BULK TRUCK _____
 # 394 DRIVER Tony
 BULK TRUCK _____
 # _____ DRIVER _____

REMARKS:

Press Tool to 1200' - open tool
 out circulation. mix ~~300~~ 300#s
 cement tail with 300#s cement
 with 350# hulls. Displace 13.5 bbl
~~press to 1200'~~ ~~Revised 4 bbl~~
 clean. Job completed @ 12:30
 am THANKS Fuzzy & crew

CEMENT
 AMOUNT ORDERED 500 60/40 60/40
114# Close seal - 500# hulls
(used 350#s - 350# hulls)

COMMON	<u>210</u>	@ <u>15.45</u>	<u>3244.50</u>
POZMIX	<u>140</u>	@ <u>8.00</u>	<u>1120.00</u>
GEL	<u>18</u>	@ <u>20.00</u>	<u>374.40</u>
CHLORIDE		@	
ASC		@	
		@	
Hulls	<u>7</u>	@ <u>31.75</u>	<u>222.25</u>
		@	
		@	
		@	
		@	
		@	
HANDLING	<u>534</u>	@ <u>2.40</u>	<u>1281.60</u>
MILEAGE	<u>10.45</u>	@	<u>1068.00</u>
TOTAL			<u>7311.45</u>

SERVICE

DEPTH OF JOB			
PUMP TRUCK CHARGE			<u>1185.00</u>
EXTRA FOOTAGE		@	
MILEAGE	<u>20</u>	@ <u>7.00</u>	<u>140.00</u>
MANIFOLD		@	
		@	
		@	

CHARGE TO: Ritchie Exploration
 STREET _____
 CITY _____ STATE _____ ZIP _____

TOTAL 1325.00

PLUG & FLOAT EQUIPMENT

_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
TOTAL		_____

To Allied Cementing Co., LLC.
 You are hereby requested to rent cementing equipment
 and furnish cementer and helper(s) to assist owner or
 contractor to do work as is listed. The above work was
 done to satisfaction and supervision of owner agent or
 contractor. I have read and understand the "GENERAL
 TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME _____

SIGNATURE Thomas P. Ash

SALES TAX (If Any) _____
 TOTAL CHARGES _____
 DISCOUNT _____ IF PAID IN 30 DAYS

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