

~~Amended~~

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

CONFIDENTIAL WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

Form ACO-1
October 2008
Form Must Be Typed

8/31/11

OPERATOR: License # 32294

Name: Osborn Energy, L.L.C.

Address 1: 24850 Farley

Address 2:

City: Bucyrus State: KS Zip: 66013 +

Contact Person: Custin Hamblin

Phone: (913) 533-9900

KCC

CONTRACTOR: License # 32294

Name: Osborn Energy, L.L.C.

AUG 31 2009

Wellsite Geologist: Rex Ashlock

CONFIDENTIAL

Purchaser: Akawa Natural Gas, L.L.C.

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: Osborn Energy, L.L.C.

Well Name: Adams 7

Original Comp. Date: 9/2/1997 Original Total Depth: 840

Deepening Re-perf. Conv. to Enhr. Conv. to SWD

Plug Back: Plug Back Total Depth

Cummiled Docket No.: _____

Dual Completion Docket No.: _____

Other (SWD or Enhr.?) Docket No.: _____

8/28/1997 8/30/1997 * 8/24/2009

Spud Date or Date Reached TD Completion Date or Recompletion Date

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: Custin Hamblin

Title: Geologist Date: 8-31-09

Subscribed and sworn to before me this 31st day of August.

2009.

Notary Public:

Date Commission Expires:

Jane Brewer
Notary Public
State of Kansas
My Commission Expires 3-23-11

API No. 15 - 01 091-22796-0000

Spot Description: SE4, NE4 Sec. 12 T15S R24E

SE SE NE Sec. 12 Twp. 15 S. R. 24 East West

2970 Feet from North / South Line of Section

330 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE NW SE SW

County: Johnson

Lease Name: Adams Well #: 7

Field Name: Stilwell

Producing Formation: Squirrel

Elevation: Ground: 1070 Kelly Bushing:

Total Depth: 840' Plug Back Total Depth:

Amount of Surface Pipe Set and Cemented at: 20' Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: Feet

If Alternate II completion, cement circulated from: 813

feet depth to: surface w/ 106 s.c.m.t.

Alt II - Dig - 10/9/09

Drilling Fluid Management Plan

(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.: _____

KCC Office Use ONLY

Letter of Confidentiality Received
If Denied, Yes Date: _____

Wireline Log Received

Geologist Report Received

KANSAS CORPORATION COMMISSION

UIC Distribution

SEP 02 2009

RECEIVED

Operator Name: Osborn Energy, L.L.C. Lease Name: Adams Well #: 7
 Sec. 12 Twp. 15 S. R. 24 East West County: Johnson

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 (Attach Additional Sheets)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Log Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Electric Log Run (Submit Copy)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
List All E. Logs Run: Gamma Ray Neutron/CCL		KCC AUG 31 2009 CONFIDENTIAL	

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	8"	7"		20'	portland	6 sacks	water
Production	6 1/4"	4 1/2"		813	50/50 poz	106	

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
— Perforate				
— Protect Casing				
— Plug Back TD				
— 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
2 shots/foot	266-272, 284-292	200 gal acid	266-272, 284-292
2 shots/foot	583-601	75 gal acid, 5000# sand	583-601
2 shots/foot	717-727, 732-742	300 gal acid, 5500# sand	717-727, 732-742
TUBING RECORD:	Size: Set At: Packer At:	Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Date of First, Resumed Production, SWD or Enhr.		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 Bbls. na	Gas Mcf 15	Water Bbls. Gas-Oil Ratio Gravity

DISPOSITION OF GAS:	METHOD OF COMPLETION:	PRODUCTION INTERVAL:
<input type="checkbox"/> Vented <input checked="" type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, Submit ACO-18.)	<input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	583-601 KANSAS CORPORATION COMMISSION

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

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