

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

9/27/13
Form ACO-1
October 2008
Form Must Be Typed

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 # 33350
Name: Southwind Drilling Inc.
Wellsite Geologist: Dave Williams
Purchaser: _____

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: _____
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>6/9/11</u>	<u>6/18/11</u>	<u>6/18/11</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 009-25562-00-00
Spot Description: 55' N & 15' E
W/2 NW Sec. 30 Twp. 18 S. R. 15 East West
1265 Feet from North / South Line of Section
675 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Barton
Lease Name: Wissman 30AB Well #: 1
Field Name: _____
Producing Formation: _____
Elevation: Ground: 1919 Kelly Bushing: 1928
Total Depth: 3609 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: _____ 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 DANY 10511
(Data must be collected from the Reservoir)
Chloride content: 66000 ppm Fluid volume: 700 bbls
Dewatering method used: evaporation
Location of fluid disposal if hauled offsite: _____
Operator Name: _____
Lease Name: _____ License No.: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____
County: _____ Docket No.: _____

RECEIVED
SEP 29 2011
KCC WICHITA

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: 9/27/11
Subscribed and sworn to before me this 27th day of September
20 11
Notary Public: Debra K Phillips
Date Commission Expires: 5-4-2015

KCC Office Use ONLY
 Letter of Confidentiality Received 9/27/11-9/27/13
 If Denied, Yes Date: _____
_____ Wireline Log Received
_____ Geologist Report Received
_____ UIC Distribution
CONFIDENTIAL
SEP 27 2013

DEBRA K. PHILLIPS
Notary Public - State of Kansas
My Appl Expires 5-4-15

KCC