

## CONFIDENTIAL

Kansas Corporation Commission Oil & Gas Conservation Division 1065313

Form ACO-1
June 2009
Form Must Be Typed
Form must be Signed
All blanks must be Filled

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

OPERATOR: License #	3882		API No. 15	
Name: Samuel Gary Jr. & Associates, Inc.			Spot Description:	
Address 1: 1515 WYNKOOP, STE 700			NW_SE_NW_NW_Sec. 25 Twp. 15 S. R. 16 East  West	
Address 2:			930 Feet from V North / South Line of Section	
City: DENVER State: CO Zip: 80202 +			900 Feet from East / ✓ West Line of Section	
Contact Person: NEIL			Footages Calculated from Nearest Outside Section Corner:	
Phone: ( 303 ) 831-4673			□ne ☑nw □se □sw	
CONTRACTOR: Licens			County: Ellis	
Name: Val Energy, Inc.			Lease Name: Well #: 1-25	
Wellsite Geologist: TIM			Field Name:	
_			Producing Formation: N/A	
Designate Type of Comp			Elevation: Ground: 1800 Kelly Bushing: 1810	
New Well	Re-Entry	Workover	Total Depth: 3460 Plug Back Total Depth:	
	vsw □ swp	□ SIOW	Amount of Surface Pipe Set and Cemented at: 889 Fee	
Gas 🗸 C	<del></del>	☐ sigw	Multiple Stage Cementing Collar Used? ☐ Yes ✓ No	
☐ OG	GSW	Temp. Abd.	If yes, show depth set:Feet	
CM (Coal Bed Me	thane)		If Alternate II completion, cement circulated from:	
Cathodic C	Other (Core, Expl., etc.):	The second secon	feet depth to:w/sx cm	
If Workover/Re-entry: O	ld Well Info as follows:		isot dopin to.	
Operator:				
Well Name:			Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)	
Original Comp. Date:	Original To	otal Depth:	Chloride content: 77000 ppm Fluid volume: 1000 bbls	
Deepening	Re-perf. Conv. to	ENHR Conv. to SWD	Dewatering method used: Hauled to Disposal	
	Conv. to	GSW	Dewatering method used.	
Plug Back:	Plu	g Back Total Depth	Location of fluid disposal if hauled offsite:	
Commingled			Operator Name: CRAIG OIL COMPANY	
Dual Completion	n Permit #:	i.	Lease Name: NUSS #1 License #: 31341	
SWD	Permit #:	·	Quarter NW Sec. 5 Twp. 16 S. R. 14 East Wes	
ENHR	Permit #:		County: BARTON Permit #: D-09153	
☐ GSW	Permit #:	MARKINI III MARKANI MA	County: Permit #:	
06/21/2011	06/28/2011	06/28/2011		
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date		

## 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: 10/14/2011			
Confidential Release Date:			
Wireline Log Received			
Geologist Report Received			
UIC Distribution			
ALT I II III Approved by: NAOMI JAMES Date: 10/17/2011			