



CONFIDENTIAL

OIL & GAS CONSERVATION DIVISION

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

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

OPERATOR: License # 34158 Name: O'Brien Resources, LLC Address 1: PO BOX 6149 Address 2: City: SHREVEPORT State: LA Zip: 71136 Contact Person: Heather Haynes Phone: (318) 865-8568 CONTRACTOR: License # 6039 Name: L. D. Drilling, Inc. Wellsite Geologist: Kim Shoemaker Purchaser:

Designate Type of Completion: [X] New Well [] Re-Entry [] Workover [] Oil [] WSW [] SWD [] SIOW [] Gas [X] 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 #: [] Dual Completion Permit #: [] SWD Permit #: [] ENHR Permit #: [] GSW Permit #:

Table with 3 columns: Spud Date or Recompletion Date, Date Reached TD, Completion Date or Recompletion Date. Values: 08/05/2011, 08/15/2011, 08/16/2011

API No. 15 - 15-101-22290-00-00 Spot Description: NW SE SE NE Sec. 2 Twp. 17 S. R. 30 [] East [X] West 2012 Feet from [X] North [] South Line of Section 537 Feet from [X] East [] West Line of Section Footages Calculated from Nearest Outside Section Corner: [X] NE [] NW [] SE [] SW County: Lane Lease Name: Colt 45 FBC 2- Well #: 2 Field Name: Producing Formation: N/A Elevation: Ground: 2847 Kelly Bushing: 2850 Total Depth: 4722 Plug Back Total Depth: Amount of Surface Pipe Set and Cemented at: 267 Feet Multiple Stage Cementing Collar Used? [] Yes [X] No If yes, show depth set: Feet If Alternate II completion, cement circulated from: feet depth to: w/ sx cmt.

Drilling Fluid Management Plan (Data must be collected from the Reserve Pit) Chloride content: 15000 ppm Fluid volume: 770 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

[X] Letter of Confidentiality Received Date: 11/15/2011 [] Confidential Release Date: [X] Wireline Log Received [] Geologist Report Received [] UIC Distribution ALT [] I [X] II [] III Approved by: NAOMI JAMES Date: 11/17/2011