



CONFIDENTIAL WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 5822
 Name: Val Energy, Inc.
 Address 1: 200 W DOUGLAS AVE STE 520
 Address 2: _____
 City: WICHITA State: KS Zip: 67202 + 3005
 Contact Person: TODD ALLAM
 Phone: (316) 263-6688
 CONTRACTOR: License # 5822
 Name: Val Energy, Inc.
 Wellsite Geologist: ZEB STEWART
 Purchaser: MACLASKEY

Designate Type of Completion:

- New Well Re-Entry Workover
- Oil WSW SWD SIOW
 Gas 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 #: _____

<u>8/24/2011</u>	<u>08/30/2011</u>	<u>9/15/2011</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-007-23754-00-00
 Spot Description: _____
NW SE NE SW Sec. 27 Twp. 30 S. R. 12 East West
1680 Feet from North / South Line of Section
2240 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Barber
 Lease Name: MOCKINGBIRDHILL Well #: 1-27
 Field Name: _____

Producing Formation: VIOLA
 Elevation: Ground: 1753 Kelly Bushing: 1764
 Total Depth: 4725 Plug Back Total Depth: _____
 Amount of Surface Pipe Set and Cemented at: 226 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

(Data must be collected from the Reserve Pit)

Chloride content: 44000 ppm Fluid volume: 1800 bbls
 Dewatering method used: Hauled to Disposal
 Location of fluid disposal if hauled offsite: _____
 Operator Name: VAL ENERGY
 Lease Name: MADDIX SWD License #: 5822
 Quarter NW Sec. 11 Twp. 31 S. R. 12 East West
 County: BARBER Permit #: D30751

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: 10/27/2011
 Confidential Release Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
 ALT I II III Approved by: NAOMI JAMES Date: 10/28/2011