

ORIGINAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

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 # 32204
 Name: REDLAND RESOURCES, INC.
 Address 1: 6001 NW 23RD STREET
 Address 2: _____
 City: OKLAHOMA CITY State: OK Zip: 73127 + _____
 Contact Person: ALAN THROWER
 Phone: (405) 789-7104
 CONTRACTOR: License # 5929
 Name: DUKE DRILLING CO
 Wellsite Geologist: MIKE POLLOK
 Purchaser: N/A

Designate Type of Completion:

- ☐ New Well ☒ Re-Entry ☐ Workover
- ☐ Oil ☐ WSW ☐ SWD ☐ SLOW
☐ Gas ☒ D&A ☐ ENHR ☐ SIGW
☐ OG ☐ GSW ☐ Temp. Abd.
☐ CM (Coal Bed Methane)
☐ Cathodic ☐ Other (Core, Expl., etc.): lost hole

If Workover/Re-entry: Old Well Info as follows:

Operator: ZINKE & TRUMBO, LTD
 Well Name: BARBARA BAILEY #1

Original Comp. Date: _____ Original Total Depth: 4885'

- ☐ 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 #: _____

07/21/11 07/22/11
 Spud Date or Date Reached TD Completion Date or
 Recompletion Date Recompletion Date

API No. 15 - 083-21186-00-01

Spot Description: _____
NW SW NW NE Sec. 31 Twp. 23 S. R. 24 ☐ East ☒ West
966 Feet from ☒ North / ☐ South Line of Section
2,356 Feet from ☒ East / ☐ West Line of Section

Footages Calculated from Nearest Outside Section Corner:

☒ NE ☐ NW ☐ SE ☐ SWCounty: HODGEMAN COUNTYLease Name: BAILEY SWD OWWO Well #: 1Field Name: GRAY HAWKProducing Formation: N/AElevation: Ground: 2442' Kelly Bushing: 2455'Total Depth: 1033' Plug Back Total Depth: _____Amount of Surface Pipe Set and Cemented at: 477 FeetMultiple 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: N/A ppm Fluid volume: _____ bblsDewatering method used: EVAPORATIONLocation of fluid disposal if hauled offsite: OCT 27 2011

Operator Name: _____

Lease Name: _____ License #: KCC WICHITAQuarter _____ Sec. _____ Twp. _____ S. R. _____ ☐ East ☐ West

County: _____ Permit #: _____

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.

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.

Signature: Alan ThrowerTitle: PRESIDENT Date: 10/25/11

KCC Office Use ONLY

- ☐ Letter of Confidentiality Received
 Date: _____
☐ Confidential Release Date: _____
☐ Wireline Log Received
☐ Geologist Report Received
☐ UIC Distribution
 ALT ☐ I ☒ II ☐ III Approved by: 244 Dg Date: 11/8/11

Operator Name: REDLAND RESOURCES, INC. Lease Name: BAILEY SWD OWWO Well #: 1
 Sec. 31 Twp. 23 S. R. 24 ☐ East ☒ West County: HODGEMAN COUNTY

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 complete copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <i>(Attach Additional Sheets)</i> <div style="display: flex; justify-content: flex-end;"> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No </div> Samples Sent to Geological Survey <div style="display: flex; justify-content: flex-end;"> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No </div> Cores Taken <div style="display: flex; justify-content: flex-end;"> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No </div> Electric Log Run <div style="display: flex; justify-content: flex-end;"> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No </div> Electric Log Submitted Electronically <div style="display: flex; justify-content: flex-end;"> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No </div> <i>(If no, Submit Copy)</i> List All E. Logs Run: NO LOGS - ABANDONED WELL @ 1033'	<div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample </div> <div style="display: flex; justify-content: space-between;"> Name Top Datum </div>
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CASING RECORD <input type="checkbox"/> New <input checked="" 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	12.25"	8.625"		477'			

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> 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

RECEIVED
 OCT 27 2011
 KCC WICHITA

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 type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) _____			
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity	

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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