

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
October 2008
Form Must Be Typed

10-8-09

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 30604
Name: Raydon Exploration
Address 1: 1601 NW Expressway, Suite 1300
Address 2: _____
City: Oklahoma City State: OK Zip: 73118 + 1462
Contact Person: David E. Rice
Phone: (620) 624-0156
CONTRACTOR: License # 34127
Name: Tomcat Drilling LLC
Wellsite Geologist: _____
Purchaser: _____

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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.: _____
8/23/09 9/5/09 9/6/09
Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

API No. 15 - 069-20318-00-00
Spot Description: _____
W2 E2 E2 NE Sec. 34 Twp. 24 S. R. 29 East West
1320 Feet from North / South Line of Section
335 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Gray
Lease Name: G & B Farms Well #: 1-34
Field Name: Wildcat
Producing Formation: N/A
Elevation: Ground: 2776 Kelly Bushing: 2787
Total Depth: 5050 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 1685 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/ _____

PA-Dlg-10-14/09 ^{5X cmt.}

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content: _____ ppm Fluid volume: _____ bbls
Dewatering method used: _____
Location of fluid disposal if hauled offsite: _____
Operator Name: Dillco Fluid Service, Inc
Lease Name: I B Regier License No.: 6652
Quarter _____ Sec. 17 Twp. 33 S. R. 27 East West
County: Meade Docket No.: D21232

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: David E. Rice
Title: Agent Date: 9/8/2009
Subscribed and sworn to before me this 8th day of October
20 09.
Notary Public: Becki Andrews
Date Commission Expires: _____

NOTARY PUBLIC - STATE OF KANSAS
BECKI ANDREWS
My Commission Expires 4-22-2013

KCC Office Use ONLY
 Letter of Confidentiality Received
 If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
_____ UIC Distribution
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Operator Name: Raydon Exploration Lease Name: G & B Farms Well #: 1-34
 Sec. 34 Twp. 24 S. R. 29 East West County: Gray

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

Drill Stem Tests Taken <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: Array Compensated Resistivity Log Spectral Density Dual Spaced Neutron Log Microlog Borehole Sonic Array Log	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:70%;">Name</td> <td style="width:15%;">Top</td> <td style="width:15%;">Datum</td> </tr> <tr> <td>Topeka</td> <td>3530</td> <td></td> </tr> <tr> <td>Toronto</td> <td>4094</td> <td></td> </tr> <tr> <td>Marmaton</td> <td>4609</td> <td></td> </tr> <tr> <td>Ft Scott</td> <td>4707</td> <td></td> </tr> <tr> <td>St Genevieve</td> <td>4865</td> <td></td> </tr> <tr> <td>Spergen</td> <td>4972</td> <td></td> </tr> </table>	Name	Top	Datum	Topeka	3530		Toronto	4094		Marmaton	4609		Ft Scott	4707		St Genevieve	4865		Spergen	4972	
Name	Top	Datum																				
Topeka	3530																					
Toronto	4094																					
Marmaton	4609																					
Ft Scott	4707																					
St Genevieve	4865																					
Spergen	4972																					

CASING RECORD <input type="checkbox"/> New <input 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	12-1/4"	8-5/8"	24#	1685'	Varicem/Halcem	525	WG-17, 2% CC, Poly-E-Flake

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 <i>(Amount and Kind of Material Used)</i>	Depth

TUBING RECORD: Size: _____ Set At: _____ Packer At: _____		Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Date of First, Resumed Production, SWD or Enhr. N/A		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 <input checked="" type="checkbox"/> Other (Specify) <u>plug</u>	PRODUCTION INTERVAL: _____ _____
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October 8, 2009

Kansas Corporation Commission
Oil & Gas Conservation Division
130 S. Main, Room 2078
Wichita, KS 67202

RE: Raydon Exploration, Inc.
G & B Farms #1-34
Sec 34-24S-29W
Gray Co., KS
API #15-069-20318-00-00

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To Whom It May Concern:

Enclosed are the Form ACO-1 Completion Report and cementing tickets for the above-mentioned well.

Please hold all information contained in this well confidential for a period of at least one year.

If you have any further questions, please feel free to give me a call.

Sincerely,

David Rice, Agent
Raydon Exploration, Inc.

DR/ba

cc: Raydon Exploration, Inc.

Attachments

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HALLIBURTON

Cementing Job Summary

The Road to Excellence Starts with Safety

Sold To #: 304931	Ship To #: 2741121	Quote #:	Sales Order #: 6880292
Customer: RAYDON EXPLORATION, INC.		Customer Rep: Thompson, Tim	
Well Name: G&B Farms	Well #: 1-34	API/UWI #:	
Field:	City (SAP): CIMARRON	County/Parish: Gray	State: Kansas
Contractor: Tomcat	Rig/Platform Name/Num: 23		
Job Purpose: Plug to Abandon Service			
Well Type: Development Well	Job Type: Plug to Abandon Service		
Sales Person: HESTON, MYRON	Srvc Supervisor: BRINKMAN, BENNETT	MBU ID Emp #: 414024	

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Job Personnel

HES Emp Name	Exp Hrs	Emp #	HES Emp Name	Exp Hrs	Emp #	HES Emp Name	Exp Hrs	Emp #
BRINKMAN, BENNETT Wade	5.5	414024	MILLER, ELWOOD W	5.5	459317	NALL, CHAD Alan	5.5	426530
NALL, JAMES Tracy	5.5	412260						

Equipment

HES Unit #	Distance-1 way	HES Unit #	Distance-1 way	HES Unit #	Distance-1 way	HES Unit #	Distance-1 way

Job Hours

Date	On Location Hours	Operating Hours	Date	On Location Hours	Operating Hours	Date	On Location Hours	Operating Hours
09-05-2009	5.5	2						
TOTAL								

Total is the sum of each column separately

Job

Job Times

Formation Name	Formation Depth (MD)	Top	Bottom	Called Out	Date	Time	Time Zone
				On Location	05 - Sep - 2009	10:30	CST
Form Type			BHST	On Location	05 - Sep - 2009	15:15	CST
Job depth MD	1680. ft		Job Depth TVD	Job Started	05 - Sep - 2009	17:45	CST
Water Depth			Wk Ht Above Floor	Job Completed	05 - Sep - 2009	20:45	CST
Perforation Depth (MD)	From		To	Departed Loc	05 - Sep - 2009	21:35	CST

Well Data

Description	New / Used	Max pressure psig	Size in	ID in	Weight lbm/ft	Thread	Grade	Top MD ft	Bottom MD ft	Top TVD ft	Bottom TVD ft
Cement Plug								200.	300.		
Cement Plug								980.	1080.		
Cement Plug	New							1610.	1710.		
Production Hole				7.875				1619.	5100.		
Surface Hole				12.25					1650.		
Drill Pipe X-Hole	New		4.5	3.826	16.6		X		1680.		

Tools and Accessories

Type	Size	Qty	Make	Depth	Type	Size	Qty	Make	Depth	Type	Size	Qty	Make
Guide Shoe					Packer					Top Plug			
Float Shoe					Bridge Plug					Bottom Plug			
Float Collar					Retainer					SSR plug set			
Insert Float										Plug Container			
Stage Tool										Centralizers			

Miscellaneous Materials

Gelling Agt	Conc	Surfactant	Conc	Acid Type	Qty	Conc %
Treatment Fld	Conc	Inhibitor	Conc	Sand Type	Size	Qty

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Saturday, September 05, 2009 20:54:00

7.20.130

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Cementing Job Summary

Fluid Data										
Stage/Plug #: 1										
Fluid #	Stage Type	Fluid Name	Qty	Qty uom	Mixing Density lbm/gal	Yield ft ³ /sk	Mix Fluid Gal/sk	Rate bbl/min	Total Mix Fluid Gal/sk	
1	PLUG AT 1701	POZ PREMIUM 40/60 - SBM (15075)	50	sacks	13.5	1.62	8.25		8.25	
	4 %	BENTONITE, BULK (100003682)								
	8.249 Gal	FRESH WATER								
Stage/Plug #: 2										
Fluid #	Stage Type	Fluid Name	Qty	Qty uom	Mixing Density uom	Yield uom	Mix Fluid uom	Rate uom	Total Mix Fluid uom	
1	PLUG AT 1071	POZ PREMIUM 40/60 - SBM (15075)	50	sacks	13.5	1.62	8.25		8.25	
	4 %	BENTONITE, BULK (100003682)								
	8.249 Gal	FRESH WATER								
Stage/Plug #: 3										
Fluid #	Stage Type	Fluid Name	Qty	Qty uom	Mixing Density uom	Yield uom	Mix Fluid uom	Rate uom	Total Mix Fluid uom	
1	PLUG AT 535	POZ PREMIUM 40/60 - SBM (15075)	30	sacks	13.5	1.62	8.25		8.25	
	4 %	BENTONITE, BULK (100003682)								
	8.249 Gal	FRESH WATER								
Stage/Plug #: 4										
Fluid #	Stage Type	Fluid Name	Qty	Qty uom	Mixing Density uom	Yield uom	Mix Fluid uom	Rate uom	Total Mix Fluid uom	
1	PLUG AT 63	POZ PREMIUM 40/60 - SBM (15075)	20	sacks	13.5	1.62	8.25		8.25	
	4 %	BENTONITE, BULK (100003682)								
	8.249 Gal	FRESH WATER								
2	RAT AND MOUSE HOLE	POZ PREMIUM 40/60 - SBM (15075)	50	sacks	13.5	1.62	8.25		8.25	
	4 %	BENTONITE, BULK (100003682)								
	8.249 Gal	FRESH WATER								
Calculated Values			Pressures			Volumes				
Displacement			Shut In: Instant			Lost Returns		Cement Slurry		Pad
Top Of Cement			5 Min			Cement Returns		Actual Displacement		Treatment
Frac Gradient			15 Min			Spacers		Load and Breakdown		Total Job
Rates										
Circulating			Mixing			Displacement			Avg. Job	
Cement Left In Pipe			Amount	0 ft	Reason	Shoe Joint				
Frac Ring # 1 @		ID	Frac ring # 2 @		ID	Frac Ring # 3 @		ID	Frac Ring # 4 @	
The Information Stated Herein Is Correct					Customer Representative Signature					

[Handwritten Signature]

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