



KANSAS CORPORATION COMMISSION 1066199
OIL & GAS CONSERVATION DIVISION

Form ACO-1
June 2009

CONFIDENTIAL

WELL COMPLETION FORM

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

WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 3911
Name: Rama Operating Co., Inc.
Address 1: 101 S MAIN ST
Address 2: _____
City: STAFFORD State: KS Zip: 67578 + 1429
Contact Person: Robin L. Austin
Phone: (620) 234-5191
CONTRACTOR: License # 5142
Name: Sterling Drilling Company
Wellsite Geologist: Josh Austin
Purchaser: _____

API No. 15 - 15-185-23704-00-00
Spot Description: _____
NE SE SW SE Sec. 18 Twp. 24 S. R. 11 East West
360 Feet from North / South Line of Section
1636 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Stafford
Lease Name: KU Well #: 1-18
Field Name: _____
Producing Formation: D&A
Elevation: Ground: 1838 Kelly Bushing: 1849
Total Depth: 4100 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 280 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.

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, Expt., 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 #: _____
10/17/2011 10/23/2011 10/23/2011
Spud Date or Date Reached TD Completion Date or Recompletion Date

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content: 0 ppm Fluid volume: 400 bbls
Dewatering method used: Hauled to Disposal
Location of fluid disposal if hauled offsite:
Operator Name: Rama Operating Co.
Lease Name: Jordan License #: 3911
Quarter NE Sec. 26 Twp. 24 S. R. 12 East West
County: Stafford Permit #: D15265

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: 12/01/2011

Confidential Release Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

ALT I II III Approved by: NAOMI JAMES Date: 12/01/2011