

## CONFIDENTIAL

Kansas Corporation Commission Oil & Gas Conservation Division 1068346

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 # 33036			API No. 15 - 15-097-21700-00-00
Name: Strata Exploration, Inc	<b>3.</b>		Spot Description:
Address 1: PO BOX 401			NW_SE_SE_SE_Sec. 32 Twp. 27 S. R. 18 ☐ East  West
Address 2:			
City: FAIRFIELD State: IL Zip: 62837 + 0401			600 Feet from ▼ East / West Line of Section
Contact Person: John R Kinney  Phone: (618) 842-2610			Footages Calculated from Nearest Outside Section Corner:
			Kinwa
CONTRACTOR: License # 5142  Name: Sterling Drilling Company			County: Naumann Lease Name: Naumann Well #: 1A-32
Wellsite Geologist: Jon Christense		1 = ·	Field Name:
Purchaser:			Producing Formation: Miss
Designate Type of Completion:			Elevation: Ground: 2206 Kelly Bushing: 2217
✓ New Well Re-E	intry [	Workover	Total Depth: 4900 Plug Back Total Depth:
☑ Oil	SWD	☐ SIOW	Amount of Surface Pipe Set and Cemented at: 478 Feet
☐ Gas ☐ D&A	☐ ENHR	☐ sigw	Multiple Stage Cementing Collar Used? Yes No
☐ og	☐ GSW	Temp. Abd.	If yes, show depth set: Feet
CM (Coal Bed Methane)			If Alternate II completion, cement circulated from:
Cathodic Other (Core, Expl., etc.):			feet depth to:w/sx cmt.
If Workover/Re-entry: Old Well Info	as follows:		
Operator:			
Well Name:			Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)
Original Comp. Date:			
Deepening Re-perf. Conv. to ENHR Conv. to SWD			Chloride content: 9100 ppm Fluid volume: 900 bbls
	Conv. to C	_	Dewatering method used: Hauled to Disposal
Plug Back:	_		Location of fluid disposal if hauled offsite:
Commingled		·	Operator Name: Roberts Recources
☐ Dual Completion			i e e e e e e e e e e e e e e e e e e e
SWD	Permit #:		Lease Name: MARY License #: 32781
ENHR	Permit#:		Quarter SW Sec. 16 Twp 29 S. R. 18 East West
☐ GSW	Permit #:		County: Kiowa Permit #: D28396
08/31/2011 09/11/20	311	10/27/2011	
Spud Date or Date Reached TD Recompletion Date		Completion Date or Recompletion Date	

## **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:11/28/2011
Confidential Release Date:
☑ Wireline Log Received
✓ Geologist Report Received
UIC Distribution
ALT I II III Approved by: NAOMI JAMES Date: 11/29/2011