

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL
AMENDED

Form ACO-1
September 1999
Form Must Be Typed

12/10/11

Operator: License # 8061
Name: Oil Producers Inc. of Kansas
Address: 1710 Waterfront Parkway
City/State/Zip: Wichita, KS 67206
Purchaser: Timberland Gathering & Processing Co., Inc.
Operator Contact Person: Lori Zehr
Phone: (316) 681-0231
Contractor: Name: Duke Drilling Co., Inc.
License: 5929

Wellsite Geologist: _____
Designate Type of Completion:
____ New Well ____ Re-Entry Workover
____ Oil ____ SWD ____ SLOW ____ Temp. Abd.
 Gas ____ ENHR ____ SIGW
____ Dry ____ Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Re-entry: Old Well Info as follows:
Operator: Petroleum, Inc.

Well Name: Warden #3
Original Comp. Date: 10/29/1969 Original Total Depth: 6420

____ Deepening ____ Re-perf. ____ Conv. to Enhr./SWD
____ Plug Back ____ Plug Back Total Depth
____ Commingled Docket No. _____
____ Dual Completion Docket No. _____
____ Other (SWD or Enhr.?) Docket No. _____

<u>8/20/2009</u>	<u>8/22/2009</u>	<u>9/09/2009</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 175-20080-00-01
County: Seward
____ nw-ne Sec. 25 Twp. 34 S. R. 33 East West
4620 feet from S / N (circle one) Line of Section
1980 feet from E / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Warden Well #: #3 OWWO
Field Name: Evalyn-Condit NE

Producing Formation: Mississippian
Elevation: Ground: 2796 Kelly Bushing: 2808
Total Depth: 6305 Plug Back Total Depth: 6246
Amount of Surface Pipe Set and Cemented at 1569 already set 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 WD NS 9-10-10
(Data must be collected from the Reserve Pit)

Chloride content 35,840 ppm Fluid volume 320 bbls
Dewatering method used Haul to SWD

Location of fluid disposal if hauled offsite: _____
Operator Name: See Note #1
Lease Name: _____ License No.: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
County: _____ Docket No.: _____

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: [Signature]
Title: Chief Operating Officer Date: 8/10/10
Subscribed and sworn to before me this 9 day of August
2010
Notary Public: Lori A. Zehr
Date Commission Expires: May 5, 2014

LORIA A. ZEHR
Notary Public - State of Kansas
My Appt. Expires 5/5/14

KCC Office Use ONLY
N Letter of Confidentiality Attached
If Denied, Yes Date: _____
____ Wireline Log Received
____ Geologist Report Received
____ UIC Distribution

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Side Two **CONFIDENTIAL**

Operator Name: Oil Producers Inc. of Kansas Lease Name: Warden Well #: #3 OWWO
 Sec. 25 Twp. 34 S. R. 33 East West County: Seward

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.

<p>Drill Stem Tests Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i></p> <p>Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Cores Taken Yes <input checked="" type="checkbox"/> No</p> <p>Electric Log Run <input checked="" type="checkbox"/> Yes No <i>(Submit Copy)</i></p> <p>List All E. Logs Run:</p> <p>Dual Receiver Cement Bond Log</p>	<p>Log Formation (Top), Depth and Datum Sample Name Top Datum</p> <p>Washdown-no tops</p>
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CASING RECORD							
				New	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
Production		4 1/2	10.5 & 11.6	6300	AA-2	150	

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		Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated		(Amount and Kind of Material Used)	
2	Chester		3000 gals, w/ 15%FE acid	6123-53

TUBING RECORD		Size	Set At	Packer At	Liner Run	Yes	No
		2 3/8	6061	N/A		<input checked="" type="checkbox"/>	<input type="checkbox"/>
Date of First, Resumed Production, SWD or Enhr.		Producing Method					
April 6, 2010		<input checked="" 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		
		81					

Disposition of Gas **METHOD OF COMPLETION** Production Interval

Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled
(If vented, Sumit ACO-18.) Other (Specify) _____

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