



KANSAS CORPORATION COMMISSION 1073384
OIL & GAS CONSERVATION DIVISION

Form ACO-1
June 2009

CONFIDENTIAL

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

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

OPERATOR: License # 3882
Name: Samuel Gary Jr. & Associates, Inc.
Address 1: 1515 WYNKOOP, STE 700
Address 2: _____
City: DENVER State: CO Zip: 80202 + _____
Contact Person: THOMAS G. FERTAL
Phone: (303) 831-4673
CONTRACTOR: License # 5822
Name: Val Energy, Inc.
Wellsite Geologist: TIM HENDRICK
Purchaser: _____

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.): _____

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 #: _____

<u>10/11/2011</u>	<u>10/17/2011</u>	<u>10/17/2011</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-051-26188-00-00
Spot Description: _____
W2 SE SE NE Sec. 34 Twp. 14 S. R. 17 East West
2310 Feet from North / South Line of Section
400 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW

County: Ellis
Lease Name: BRULL Well #: 1-34

Field Name: _____
Producing Formation: N/A

Elevation: Ground: 1944 Kelly Bushing: 1954

Total Depth: 3669 Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: 1105 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
(Data must be collected from the Reserve Pit)

Chloride content: 58000 ppm Fluid volume: 480 bbls
Dewatering method used: Hauled to Disposal

Location of fluid disposal if hauled offsite: _____

Operator Name: TDI INC.

Lease Name: DREILING B License #: 4787

Quarter SW Sec. 22 Twp. 14 S. R. 16 East West

County: ELLIS Permit #: D25112

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: 02/02/2012

Confidential Release Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

ALT I II III Approved by: NAOMI JAMES Date: 02/03/2012