

KCC WICHITA

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
June 2009
Form Must Be Typed
Form must be Signed
All blanks must be Filled

1-12-14

JAN 13 2012

RECEIVED

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 4767
Name: Ritchie Exploration, Inc.
Address 1: P.O. Box 783188
Address 2: _____
City: Wichita State: KS Zip: 67278 + 3188
Contact Person: John Niernberger
Phone: (316) 691-9500
CONTRACTOR: License # 5929
Name: Duke Drilling Company, Inc.
Wellsite Geologist: Terry McLeod
Purchaser: _____

API No. 15 - 057-20753-00-00
Spot Description: 80' S & 160' E
E/2 E/2 Sec. 32 Twp. 28 S. R. 23 East West
2,560 Feet from North / South Line of Section
500 Feet from East / West Line of Section

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

County: Ford
Lease Name: Arch Well #: 2

Field Name: _____
Producing Formation: Pawnee

Elevation: Ground: 2500 Kelly Bushing: 2512

Total Depth: 5300 Plug Back Total Depth: 5239

Amount of Surface Pipe Set and Cemented at: 374 Feet

Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: 1445 Feet

If Alternate II completion, cement circulated from: 1445
feet depth to: surface w/ 350 sx cmt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)

Chloride content: 14700 ppm Fluid volume: 700 bbls

Dewatering method used: evaporation

Location of fluid disposal if hauled offsite: _____

Operator Name: _____

Lease Name: _____ License #: _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West

County: _____ Permit #: _____

CONFIDENTIAL

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, 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 #: _____

9/30/11 10/10/11 10/10/11
Spud Date or Date Reached TD Completion Date or
Recompletion Date

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.

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.

Signature: _____

Title: Production Manager Date: 1/12/12

KCC Office Use ONLY

Letter of Confidentiality Received
Date: 1/12/12 - 1/12/14
 Confidential Release Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
ALT I II III Approved by: NJ Date: 1-18-12