



# 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 # 5003  
 Name: McCoy Petroleum Corporation  
 Address 1: 8080 E CENTRAL STE 300  
 Address 2: \_\_\_\_\_  
 City: WICHITA State: KS Zip: 67206 + 2366  
 Contact Person: Scott Hampel  
 Phone: ( 316 ) 636-2737  
 CONTRACTOR: License # 30606  
 Name: Murfin Drilling Co., Inc.  
 Wellsite Geologist: Jerry Smith  
 Purchaser: None

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 #: \_\_\_\_\_

1/14/2012	1/22/2012	1/22/2012
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-109-21064-00-00  
 Spot Description: 150' E of NE NW SW  
E2 NE NW SW Sec. 25 Twp. 12 S. R. 34  East  West  
2310 Feet from  North /  South Line of Section  
1140 Feet from  East /  West Line of Section  
 Footages Calculated from Nearest Outside Section Corner:  
 NE     NW     SE     SW  
 County: Logan  
 Lease Name: CRAIG 'A' Well #: 1-25  
 Field Name: Wildcat  
 Producing Formation: None  
 Elevation: Ground: 3140 Kelly Bushing: 3151  
 Total Depth: 4800 Plug Back Total Depth: \_\_\_\_\_  
 Amount of Surface Pipe Set and Cemented at: 224 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: 9000 ppm Fluid volume: 1000 bbls  
 Dewatering method used: Evaporated  
 Location of fluid disposal if hauled offsite: \_\_\_\_\_  
 Operator Name: \_\_\_\_\_  
 Lease Name: \_\_\_\_\_ License #: \_\_\_\_\_  
 Quarter \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  East  West  
 County: \_\_\_\_\_ Permit #: \_\_\_\_\_

**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: 02/07/2012

Confidential Release Date: \_\_\_\_\_

Wireline Log Received

Geologist Report Received

UIC Distribution

ALT  I  II  III Approved by: NAOMI JAMES Date: 02/07/2012