KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

COMPLETION FORM

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

CONFIDENTIAL WELL COMPLETION FURING WELL HISTORY - DESCRIPTION OF WELL & LEASE 057-20762-00-01

OPERATOR: License # 4767	API No. 15
Name: Ritchie Exploration, Inc.	Spot Description: 90' N & 140' E
Address 1: P.O. Box 783188	NW_NE_NE Sec. 16 Twp. 28 S. R. 22 ☐ East West
Address 2:	
City: Wichita State: KS Zip: 67278 + 3188	1 888
Contact Person: John Niernberger	Feet from Feet from Section
Phone: (316) 691-9500	Footages Calculated from Nearest Outside Section Corner:
CONTRACTOR: License #_5929	☑NE □NW □SE □SW
Name: Duke Drilling Co., Inc.	County: Ford Lease Name: Fravel-Fisher Well #: 1
Wellsite Geologist: Mike Engelbrecht	
	Field Name:
Purchaser:	Producing Formation:
Designate Type of Completion:	Elevation: Ground: 2409 Kelly Bushing: 2420
New Well Re-Entry Workover	Total Depth: 5210 Plug Back Total Depth:
☐ Oil ☐ WSW ☐ SWD ☐ SIOW	Amount of Surface Pipe Set and Cemented at: 361 Feet
☐ Gas ☑ D&A ☐ ENHR ☐ SIGW	Multiple Stage Cementing Collar Used? ☐ Yes ☑ No
☐ GSW ☐ Temp. Abd.	If yes, show depth set: Feet
Cathodia Cohor (Com Cont.)	If Alternate II completion, cement circulated from:
Cathodic Other (Core, Expt., etc.):	feet depth to:sx cmt.
If Workover/Re-entry: Old Well Info as follows:	
Operator:	Orilling Fluid Management Plan
Well Name:	(Data must be collected from the Reserve Pit)
Original Comp. Date: Original Total Depth: Original Total Depth: Original Total Depth:	Chloride content: 17500 ppm Fluid volume: 1000 bbls
☐ Deepening ☐ Re-perf. ☐ Conv. to ENHR ☐ Conv. to SWD ☐ Conv. to GSW	Dewatering method used: evaporation
Plug Back: Plug Back Total Depth	Location of fluid disposal if hauled offsite:
Commingled Permit #:	,
Dual Completion Permit #:	Operator Name:
SWD Permit #:	Lease Name: License #:
ENHR Permit #:	Quarter Sec. Two EDENTIAL East REGEIVED
GSW Permit #:	County:CONFERMIT#:
10/28/11 11/10/11 11/10/11	FEB 2 0 2014 FEB 2 2 2012
Spud Date or Date Reached TD Completion Date or Recompletion Date Recompletion Date	
INSTRUCTIONS: An original and two copies of this form shall be filed with	the Kansas Sorrardian Sommission 1999 M. C. WICHITA
Tailsas 07202, within 120 days of the spud date, recompletion, workover or co	Inversion of a well. Rule 82-3-130, 82-3-106 and 92-3-107 and 4-4
of side two of this form will be held confidential for a period of 12 months if required tiality in excess of 12 months). One copy of all wireline logs and geologist well as ATTACHED, Submit CD 4 formation	uested in writing and submitted with the form (see rule 92.2.457 to 1
BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form	m with all temporarily abandoned wells.
AFFIDAVIT	KCC Office Use ONLY
I am the affiant and I bereby certify that all requirements of the statutes, rules and re lations promulgated to regulate the oil and gas industry have been fully complied	egu- with Letter of Confidentiality Received
and the statements herein are semplete and correct to the best of my knowledge	Daje: 2/20/12 - 2/20/14
	Confidential Release Date:
Signature:	Wireline Log Received
Title: Production Manager Date: 2/20/12	Geologist Report Received UIC Distribution
Date:	- UIC Distribution ALT I III Approved by: