



KANSAS CORPORATION COMMISSION 1069421
OIL & GAS CONSERVATION DIVISION

Form ACO-1
June 2009

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 # 33856
Name: White Exploration, Inc.
Address 1: 2400 N WOODLAWN STE 115
Address 2: _____
City: WICHITA State: KS Zip: 67220 + 3966
Contact Person: Kenneth S. White
Phone: (316) 682-6300
CONTRACTOR: License # 5123
Name: Pickrell Drilling Company, Inc.
Wellsite Geologist: David Goldak
Purchaser: MV Purchasing, LLC

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>11/14/2011</u>	<u>11/22/2011</u>	<u>01/12/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-007-23798-00-00

Spot Description: _____

SW NE SW SW Sec. 27 Twp. 32 S. R. 12 East West

796 Feet from North / South Line of Section

692 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Barber

Lease Name: Ash Well #: 2

Field Name: Medicine Lodge North

Producing Formation: Mississippi

Elevation: Ground: 1603 Kelly Bushing: 1613

Total Depth: 4925 Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: 293 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: 29000 ppm Fluid volume: 1800 bbls

Dewatering method used: Hauled to Disposal

Location of fluid disposal if hauled offsite: _____

Operator Name: BEMCO, LLC

Lease Name: Cole License #: 32613

Quarter NW Sec. 25 Twp. 32 S. R. 12 East West

County: Barber Permit #: D19886

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: 03/01/2012
- Confidential Release Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT I II III Approved by: NAOMI JAMES Date: 03/05/2012