



KANSAS CORPORATION COMMISSION 1079542
OIL & GAS CONSERVATION DIVISION

Form ACO-1
June 2009

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

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 4767
Name: Ritchie Exploration, Inc.
Address 1: 8100 E 22ND ST N # 700
Address 2: BOX 783188
City: WICHITA State: KS Zip: 67278 + 3188
Contact Person: John Niernberger
Phone: (316) 691-9500
CONTRACTOR: License # 33645
Name: H2 Plains, LLC
Wellsite Geologist: Peter Fiorini
Purchaser: NCRA

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: Ritchie Exploration, Inc.
Well Name: Peintner Trust
Original Comp. Date: 8/17/2007 Original Total Depth: 4960
 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 #: _____
11/30/2011 11/30/2011 12/12/2011
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 15-057-20585-00-01
Spot Description: 160' E OF W2SWSE
E2_W2_SW_SE Sec. 2 Twp. 26 S. R. 22 East West
660 Feet from North / South Line of Section
2150 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Ford
Lease Name: PEINTNER TRUST Well #: 1
Field Name: _____
Producing Formation: Altamont
Elevation: Ground: 2370 Kelly Bushing: 2379
Total Depth: 4960 Plug Back Total Depth: 4830
Amount of Surface Pipe Set and Cemented at: 310 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: 1440 Feet
If Alternate II completion, cement circulated from: 1440
feet depth to: 0 w/ 350 sx cmt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content: _____ ppm Fluid volume: _____ bbls
Dewatering method used: _____
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: 04/25/2012
 Confidential Release Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
ALT I II III Approved by: NAOMI JAMES Date: 04/25/2012



1079542

Operator Name: Ritchie Exploration, Inc. Lease Name: PEINTNER TRUST Well #: 1
 Sec. 2 Twp. 26 S. R. 22 East West County: Ford

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface test, along with final chart(s). Attach extra sheet if more space is needed. Attach complete copy of all Electric Wire-line Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Log Formation (Top), Depth and Datum	<input checked="" type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name Attached	Top Attached Datum Attached
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Electric Log Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Electric Log Submitted Electronically <i>(If no, Submit Copy)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No		
List All E. Logs Run:			

CASING RECORD <input type="checkbox"/> New <input checked="" type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
Surface	12.25	5.625	23	310	commons	200	3%cc,2% gel
Production	7.875	4.5	10.5	4959	60/40 pozmix	275	10% salt,2% gel& 3/4% CD-31

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
___ Perforate				
___ Protect Casing	-			
___ Plug Back TD				
___ Plug Off Zone	-			

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth
4	4858-4863' (Mississippian)	500 Gals, 15% NE Acid w/Iron-Out Additives	***CIBP @ 4830
	4650'-4660' (Altamont B)	750 Gals, 15% NE Acid w/Iron-Out Additives+50 Soluble-perf-ball-sealers	
4	4429'-4435' (LKC-J)	500 Gals, 15% NE Acid	**Packer @ 4612

TUBING RECORD:	Size: <u>2.375</u>	Set At: <u>4725</u>	Packer At: <u>4612</u>	Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or ENHR. <u>12/12/2011</u>	Producing Method: <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) _____			
Estimated Production Per 24 Hours	Oil Bbls. <u>.52</u>	Gas Mcf	Water Bbls. <u>41.75</u>	Gas-Oil Ratio <u>22</u>

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	Ritchie Exploration, Inc.
Well Name	PEINTNER TRUST 1
Doc ID	1079542

Tops

Name	Top	Depth
Anhydrite	1437	+942
B/Anhydrite	1465	+914
Heebner	4082	-1703
Lansing	4194	-1815
Lancing "C"	4225	-1846
Muncie Shale	4366	-1987
Stark Shale	4474	-2095
Marmaton	4570	-2195
Altamont	4614	-2235
Pawnee	4694	-2315
Cherokee Shale	4748	-2369
Atoka Shale	7819	-2440
Mississippian	4840	-2461
Miss Warsaw Dol	4875	-2496

Conservation Division
Finney State Office Building
130 S. Market, Rm. 2078
Wichita, KS 67202-3802



Phone: 316-337-6200
Fax: 316-337-6211
<http://kcc.ks.gov/>

Mark Sievers, Chairman
Ward Loyd, Commissioner
Thomas E. Wright, Commissioner

Sam Brownback, Governor

April 25, 2012

John Niernberger
Ritchie Exploration, Inc.
8100 E 22ND ST N # 700
BOX 783188
WICHITA, KS 67278-3188

Re: ACO1
API 15-057-20585-00-00
PEINTNER TRUST 1
SE/4 Sec.02-26S-22W
Ford County, Kansas

Dear Production Department:

We are herewith requesting that the Well Completion Form ACO-1 and attached information for the subject well be held confidential for a period of two years.

Should you have any questions or need additional information regarding subject well, please contact our office.

Respectfully,
John Niernberger

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Re: ACO-1
API 15-057-20585-00-00
PEINTNER TRUST 1
SE/4 Sec.02-26S-22W
Ford County, Kansas

Dear John Niernberger:

K.A.R. 82-3-107 provides for all completion information to be filed within 120 days of the spud date. Subsection(e)(2) of that regulation states "All rights to confidentiality shall be lost if the filings are not timely."

The above referenced well was spudded on 11/30/2011 and the ACO-1 was received on April 25, 2012 (not within the 120 days timely requirement).

Therefore, your request for confidential treatment of data contained within the ACO-1 filing cannot be granted at this time.

If you should have any questions, please do not hesitate to contact me at (316)337-6200.

Sincerely,

Production Department