



CONFIDENTIAL

OIL & GAS CONSERVATION DIVISION

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 34320  
 Name: Lasso Energy LLC  
 Address 1: PO Box 465  
 Address 2: \_\_\_\_\_  
 City: Chase State: KS Zip: 67524 +  
 Contact Person: BRUCE KELSO  
 Phone: ( 620 ) 259-4000  
 CONTRACTOR: License # 5822  
 Name: Val Energy, Inc.  
 Wellsite Geologist: Derek Patterson  
 Purchaser: n/a

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

3/13/2012	03/24/2012	03/26/2012
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-097-21719-00-00  
 Spot Description: C W2 SW SE  
W2 SW SE Sec. 5 Twp. 30 S. R. 18  East  West  
660 Feet from  North /  South Line of Section  
2310 Feet from  East /  West Line of Section  
 Footages Calculated from Nearest Outside Section Corner:  
 NE     NW     SE     SW  
 County: Kiowa  
 Lease Name: MCCLAREN Well #: 2  
 Field Name: NICHOLS  
 Producing Formation: ARBUCKLE  
 Elevation: Ground: 2259 Kelly Bushing: 2269  
 Total Depth: 6432 Plug Back Total Depth: \_\_\_\_\_  
 Amount of Surface Pipe Set and Cemented at: 505 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: 7886 ppm Fluid volume: 450 bbls  
 Dewatering method used: Hauled to Disposal  
 Location of fluid disposal if hauled offsite:  
 Operator Name: ROBERT RESOURCES  
 Lease Name: MARY SWD License #: 32781  
 Quarter NE Sec. 16 Twp. 29 S. R. 18  East  West  
 County: KIOWA Permit #: D28396

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	
<input checked="" type="checkbox"/>	Letter of Confidentiality Received Date: <u>03/28/2012</u>
<input type="checkbox"/>	Confidential Release Date: _____
<input checked="" type="checkbox"/>	Wireline Log Received
<input type="checkbox"/>	Geologist Report Received
<input checked="" type="checkbox"/>	UIC Distribution
ALT <input checked="" type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III	Approved by: <u>NAOMI JAMES</u> Date: <u>03/29/2012</u>