1075450

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

CONFIDENTIAL

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: Pete Fiorini
Phone: (316) 691-9500
CONTRACTOR: License # 99998
Name: COMPANY TOOLS
Wellsite Geologist: Pete 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: A. Scott Ritchie
Well Name: Rodie
Original Comp. Date: 11/21/1984 Original Total Depth: 4610

☐ 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 #:

11/03/2011	11/03/2011	11/10/2011
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-063-20802-00-02
Spot Description:
NW SE Sec. 15 Twp. 11 S. R. 31 ☐ East ☑ West
1980 Feet from ☐ North / ☑ South Line of Section
1980 Feet from ☑ East / ☐ West Line of Section
Footages Calculated from Nearest Outside Section Corner:
☐ NE ☐ NW ☑ SE ☐ SW
County: Gove
Lease Name: RODIE OWWO Well #: 1
Field Name:
Producing Formation: LKC,Myrick,Fort Scott
Elevation: Ground: 2992 Kelly Bushing: 2995
Total Depth: 4663 Plug Back Total Depth: 4575
Amount of Surface Pipe Set and Cemented at: 344 Feet
Multiple Stage Cementing Collar Used? ☑ Yes ☐ No
If yes, show depth set: 2530 Feet
If Alternate II completion, cement circulated from: 0
feet depth to: 344 w/ 225 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: 02/29/2012
☐ Confidential Release Date:
☐ Wireline Log Received
☐ Geologist Report Received
☐ UIC Distribution
ALT ☑ I ☐ II ☐ III Approved by: NAOMI JAMES Date: 03/01/2012