



KANSAS CORPORATION COMMISSION 1075461
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 # 32204
Name: Redland Resources, Inc.
Address 1: 6001 NW 23RD ST
Address 2: _____
City: OKLAHOMA CITY State: OK Zip: 73127 + 1253
Contact Person: ALAN THROWER
Phone: (405) 789-7104
CONTRACTOR: License # 5929
Name: Duke Drilling Co., Inc.
Wellsite Geologist: MIKE POLLOK
Purchaser: PARNON GATHERING

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, Expt., 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 #: _____

11/30/2011 12/05/2011 01/29/2012
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 15-083-21730-00-00

Spot Description: _____
SW SW SW NW Sec. 30 Twp. 23 S. R. 24 East West
2549 Feet from North / South Line of Section
274 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW

County: Hodgeman

Lease Name: LIBBY Well #: 30-5

Field Name: WILDCAT

Producing Formation: MISSISSIPPIAN

Elevation: Ground: 2501 Kelly Bushing: 2514

Total Depth: 4900 Plug Back Total Depth: 4878

Amount of Surface Pipe Set and Cemented at: 217 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: 1363 Feet

If Alternate II completion, cement circulated from: 1363
feet depth to: 0 w/ 240 sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 5200 ppm Fluid volume: 0 bbls

Dewatering method used: Evaporated

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