



KANSAS CORPORATION COMMISSION 1078736
OIL & GAS CONSERVATION DIVISION

Form ACO-1
June 2009

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

CONFIDENTIAL

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 9855
Name: Grand Mesa Operating Company
Address 1: 1700 N WATERFRONT PKWY BLDG 600
Address 2: _____
City: WICHITA State: KS Zip: 67206 + 5514
Contact Person: Ronald N. Sinclair
Phone: (316) 265-3000
CONTRACTOR: License # 4958
Name: Mallard, J. V., Inc.
Wellsite Geologist: Kent R. Matson
Purchaser: NCRA

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>02/21/2012</u>	<u>03/01/2012</u>	<u>03/27/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-135-25361-00-00

Spot Description: _____
SW NW SE NW Sec. 17 Twp. 17 S. R. 24 East West
1830 Feet from North / South Line of Section
1335 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Ness

Lease Name: DICKMAN Well #: 7-17

Field Name: Dickman

Producing Formation: Mississippian

Elevation: Ground: 2464 Kelly Bushing: 2469

Total Depth: 4500 Plug Back Total Depth: 4488

Amount of Surface Pipe Set and Cemented at: 212 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: 1750 Feet

If Alternate II completion, cement circulated from: 1750

feet depth to: 0 w/ 135 sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 14600 ppm Fluid volume: 800 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: 04/12/2012
- Confidential Release Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT I II III Approved by: NAOMI JAMES Date: 04/13/2012