



KANSAS CORPORATION COMMISSION 1081567
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 # 7311
Name: Shakespeare Oil Co., Inc.
Address 1: 202 W MAIN ST
Address 2: _____
City: SALEM State: IL Zip: 62881 + 1519
Contact Person: Don Williams
Phone: (618) 548-1585
CONTRACTOR: License # 33935
Name: H. D. Drilling, LLC
Wellsite Geologist: Tim Priest
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: _____
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 #: _____

03/27/2012 04/09/2012 05/10/2012
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 15-109-21043-00-00

Spot Description: _____
NE NE NW NW Sec. 21 Twp. 14 S. R. 32 East West
150 Feet from North / South Line of Section
1050 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Logan

Lease Name: Ottley Well #: 1-21

Field Name: Wildcat

Producing Formation: Cherokee, Johnson, Myrick Station, Marmaton, LKC "H & D"

Elevation: Ground: 2753 Kelly Bushing: 2763

Total Depth: 4490 Plug Back Total Depth: 4440

Amount of Surface Pipe Set and Cemented at: 223 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: 2172 Feet

If Alternate II completion, cement circulated from: 2172

feet depth to: 0 w/ 325 sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 6500 ppm Fluid volume: 2500 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: 05/18/2012
- Confidential Release Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT I II III Approved by: NAOMI JAMES Date: 05/18/2012