



KANSAS CORPORATION COMMISSION 1082200
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 # 5135
Name: Farmer, John O., Inc.
Address 1: 370 W WICHITA AVE
Address 2: PO BOX 352
City: RUSSELL State: KS Zip: 67665 + 2635
Contact Person: Marge Schulte
Phone: (785) 483-3144
CONTRACTOR: License # 31548
Name: Discovery Drilling
Wellsite Geologist: Austin Klaus
Purchaser: _____

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 #: _____

| | | |
|-----------------------------------|-------------------|---|
| <u>03/27/2012</u> | <u>04/02/2012</u> | <u>04/03/2012</u> |
| Spud Date or Recompletion Date | Date Reached TD | Completion Date or Recompletion Date |

API No. 15 - 15-163-24016-00-00
Spot Description: NW SE NW SW
NW SE NW SW Sec. 12 Twp. 7 S. R. 18 East West
1730 Feet from North / South Line of Section
860 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Rooks
Lease Name: Bobbitt Well #: 1
Field Name: Riffe Northwest
Producing Formation: None
Elevation: Ground: 1801 Kelly Bushing: 1809
Total Depth: 3400 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 1287 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: 19000 ppm Fluid volume: 80 bbls
Dewatering method used: Hauled to Disposal
Location of fluid disposal if hauled offsite:
Operator Name: RGN Company, Inc.
Lease Name: Albright #1 (SWD) License #: 33007
Quarter NE Sec. 36 Twp. 7 S. R. 18 East West
County: Rooks Permit #: D-21,754

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: 05/25/2012
 Confidential Release Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
ALT I II III Approved by: NAOMI JAMES Date: 05/29/2012