

S/7/13
 Form ACO-1
 June 2009
 Form Must Be Typed
 Form must be Signed
 All blanks must be Filled

KANSAS CORPORATION COMMISSION
 OIL & GAS CONSERVATION COMMISSION
CONFIDENTIAL
WELL COMPLETION FORM
 WELL HISTORY - DESCRIPTION OF WELL & LEASE

CONFIDENTIAL

OPERATOR: License # 34669
 Name: Stephan Tufte
 Address 1: 7531 US 59 Hwy
 Address 2: _____
 City: Oskaloosa State: KS Zip: 66066 + _____
 Contact Person: Stephan Tufte
 Phone: (785) 231-8090
 CONTRACTOR: License # 5786
 Name: McGown Drilling
 Wellsite Geologist: none
 Purchaser: none

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>2/20/12</u>	<u>2/21/12</u>	<u>2/23/12</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 103-21344-00-00

Spot Description: _____
nw nw sw sw Sec. 24 Twp. 12 S. R. 20 East West

1,155 Feet from North / South Line of Section

5,115 Feet from East / West Line of Section

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

County: Leavenworth
 Lease Name: Blaker Well #: 1
 Field Name: Wildcat
 Producing Formation: Squirrel
 Elevation: Ground: 884.2 Kelly Bushing: _____
 Total Depth: 1022 Plug Back Total Depth: 910
 Amount of Surface Pipe Set and Cemented at: 62 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: _____ ppm Fluid volume: 20 bbls

Dewatering method used: evaporation & backfill

Location of fluid disposal if hauled offsite: _____

Operator Name: CONFIDENTIAL

Lease Name: _____ License #: _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____

County: CCC Permit #: _____

RECEIVED
 MAY 09 2012

KCC WICHITA

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form (see rule 82-3-107 for confidentiality in excess of 12 months). One copy of all wireline logs and geologist well report shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

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.

Signature: [Signature]
 Title: Agent Date: 5/07/12

KCC Office Use ONLY

Letter of Confidentiality Received
 Date: 5-7-12 to 5-7-13

Confidential Release Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

ALT I II III Approved by: [Signature] Date: 5-18-12