



**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 # 3882  
Name: Samuel Gary Jr. & Associates, Inc.  
Address 1: 1515 WYNKOOP, STE 700  
Address 2: \_\_\_\_\_  
City: DENVER State: CO Zip: 80202 + \_\_\_\_\_  
Contact Person: TOM FERTAL  
Phone: ( 303 ) 831-4673  
CONTRACTOR: License # 31548  
Name: Discovery Drilling  
Wellsite Geologist: TIM HEDRICK  
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>2/9/2012</u>	<u>2/15/2012</u>	<u>2/16/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-051-26260-00-00  
Spot Description: \_\_\_\_\_  
N2\_NE\_NE\_SE Sec. 6 Twp. 15 S. R. 17  East  West  
2550 Feet from  North /  South Line of Section  
330 Feet from  East /  West Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
 NE     NW     SE     SW  
County: Ellis  
Lease Name: J.A.E. ET AL Well #: 1-6  
Field Name: \_\_\_\_\_  
Producing Formation: N/A  
Elevation: Ground: 1972 Kelly Bushing: 1980  
Total Depth: 3663 Plug Back Total Depth: \_\_\_\_\_  
Amount of Surface Pipe Set and Cemented at: 1152 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: 45000 ppm Fluid volume: 800 bbls  
Dewatering method used: Hauled to Disposal  
Location of fluid disposal if hauled offsite: \_\_\_\_\_  
Operator Name: KARLIN, GENE DBA GENE KARLIN COMPANY  
Lease Name: NUSS License #: 3444  
Quarter SW Sec. 5 Twp. 13 S. R. 17  East  West  
County: BARTON Permit #: D25588

**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: 06/04/2012  
 Confidential Release Date: \_\_\_\_\_  
 Wireline Log Received  
 Geologist Report Received  
 UIC Distribution  
ALT  I     II     III Approved by: NAOMI JAMES Date: 06/05/2012