



KANSAS CORPORATION COMMISSION 1088558
OIL & GAS CONSERVATION DIVISION

Form ACO-1
June 2009

CONFIDENTIAL

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

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

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 # 30606
Name: Murfin Drilling Co., Inc.
Wellsite Geologist: John Goldsmith
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 #:

05/11/2012 05/21/2012 06/28/2012
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 15-063-21990-00-00

Spot Description:
NE NE SE NW Sec. 17 Twp. 11 S. R. 26 ☐ East ☒ West
1477 Feet from ☒ North / ☐ South Line of Section
2519 Feet from ☐ East / ☒ West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- ☐ NE ☒ NW ☐ SE ☐ SW

County: Gove

Lease Name: Q-B Well #: 1-17

Field Name: Wildcat

Producing Formation: Lansing

Elevation: Ground: 2644 Kelly Bushing: 2649

Total Depth: 4632 Plug Back Total Depth: 4608

Amount of Surface Pipe Set and Cemented at: 260 Feet

Multiple Stage Cementing Collar Used? ☒ Yes ☐ No

If yes, show depth set: 2230 Feet

If Alternate II completion, cement circulated from: 2230

feet depth to: 0 w/ 200 sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 29000 ppm Fluid volume: 700 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: 07/24/2012
☐ Confidential Release Date:
☒ Wireline Log Received
☒ Geologist Report Received
☐ UIC Distribution
ALT ☐ I ☒ II ☐ III Approved by: NAOMI JAMES Date: 07/25/2012