

CONFIDENTIAL COMPLETION FORM

1084971

Form ACO-1
June 2009
Form Must Be Typed
Form must be Signed
All blanks must be Filled

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

| OPERATOR: License #34151 | | | API No. 15 - 15-141-20444-00-00 | |
|---|--------------------------|---|--|--|
| Name: Brinker Enter | | | Spot Description: | |
| Address 1: 216 S MARS | HALL ST | | NW_NE_NE_NW Sec. 16 Twp. 10 S. R. 15 ☐ East West | |
| Address 2: | | _ | Feet from ✓ North / ☐ South Line of Section | |
| City: GLEN ELDER State: KS Zip: 67446 + | | | 2201 Feet from East / West Line of Section | |
| Contact Person: Lee Bri | | | Footages Calculated from Nearest Outside Section Corner: | |
| Phone: (785) 545- | | | □NE ØNW □SE □SW | |
| CONTRACTOR: License | | | County: Osborne | |
| Name:WW Drilling, LL | .C | | Lease Name: ChesneyHitschmann Well #: 16-1 | |
| Wellsite Geologist: Richar | | | Field Name: | |
| Purchaser: | | | Producing Formation: Kansas City, Comglomerate | |
| Designate Type of Comple | | | Elevation: Ground: 1838 Kelly Bushing: 1841 | |
| ✓ New Well Re-Entry Workover | | | Total Depth: 3600 Plug Back Total Depth: | |
| | | | Amount of Surface Pipe Set and Cemented at: 232 Feet | |
| ☐ Oil ☐ WS | | ☐ SIOW ☐ SIGW | Multiple Stage Cementing Collar Used? ☐ Yes ✓ No | |
| ☐ Gas 🔽 D& | GSW | Temp. Abd. | If yes, show depth set:Feet | |
| CM (Coal Bed Metha | - Lund | Land Tomp. 7 Do. | | |
| , , , , , , , , , , , , , , , , , , , | ner (Core, Expl., etc.): | | If Alternate II completion, cement circulated from: | |
| if Workover/Re-entry: Old | | | feet depth to:w/sx cmt. | |
| Operator: | | | | |
| Well Name: | | | Drilling Fluid Management Plan | |
| Original Comp. Date: | | | (Data must be collected from the Reserve Pit) | |
| | | ENHR Conv. to SWD | Chloride content: 27000 ppm Fluid volume: 850 bbls | |
| Deepening | Re-perf. Conv. to | Install . | Dewatering method used: Hauled to Disposal | |
| Plug Back | Plug | | Location of fluid disposal if hauled offsite: | |
| Commingled | | , | Operator Name: Pfeifer Dozer Service | |
| Dual Completion | Permit #: | | Lease Name: Pfiefer #7 License #: 33268 | |
| SWD | Permit #: | | | |
| ENHR | Permit #: | de la | Quarter SE Sec. 25 Twp. 10 S. R. 25 East West | |
| ☐ GSW | Permit #: | | County: Graham Permit #: 30922 | |
| 5/12/2012 | 5/19/2012 | 5/19/2012 | | |
| Spud Date or Recompletion Date | Date Reached TD | Completion Date or Recompletion Date | | |

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: 07/17/2012 |
| [| Confidential Release Date: |
| [| ☑ Wireline Log Received |
| [| ☑ Geologist Report Received |
| [| UIC Distribution ALT ☐ I ☑ II ☐ III Approved by: NAOMI JAMES Date: 07/17/2012 |