



CONFIDENTIAL

OIL & GAS CONSERVATION DIVISION

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

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 32384 Name: Comanche Resources Company Address 1: 6520 N WESTERN AVE STE 300 Address 2: City: OKLAHOMA CITY State: OK Zip: 73116 + 7334 Contact Person: CARRIE RENNER Phone: (405) 755-5900 CONTRACTOR: License # 32701 Name: C & G Drilling, Inc. Wellsite Geologist: SEAN DEENIHAN Purchaser:

Designate Type of Completion: [X] New Well [] Re-Entry [] Workover [X] 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 #:

04/07/2012 04/15/2012 04/17/2012 Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

API No. 15 - 15-035-24471-00-00

Spot Description: SE SW SE NW Sec. 5 Twp. 33 S. R. 8 [X] East [] West 2490 Feet from [X] North [] South Line of Section 1670 Feet from [] East [X] West Line of Section

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

County: Cowley

Lease Name: MASSEY Well #: 5-1

Field Name:

Producing Formation: NONE

Elevation: Ground: 1046 Kelly Bushing: 1058

Total Depth: 3050 Plug Back Total Depth:

Amount of Surface Pipe Set and Cemented at: 489 Feet

Multiple Stage Cementing Collar Used? [] Yes [X] 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: 2000 ppm Fluid volume: 350 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

- [X] Letter of Confidentiality Received Date: 07/23/2012 [] Confidential Release Date: [X] Wireline Log Received [X] Geologist Report Received [] UIC Distribution ALT [X] I [] II [] III Approved by: NAOMI JAMES Date: 07/24/2012