



CONFIDENTIAL WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 32457
 Name: Abercrombie Energy, LLC
 Address 1: 10209 W. CENTRAL, STE 2
 Address 2: _____
 City: WICHITA State: KS Zip: 67212 + _____
 Contact Person: GARY MISAK
 Phone: (316) 262-1841
 CONTRACTOR: License # 5822
 Name: Val Energy, Inc.
 Wellsite Geologist: Gary Gensch
 Purchaser: NCRA

API No. 15 - 15-135-25372-00-00

Spot Description: _____
N2 NE SE SE Sec. 14 Twp. 19 S. R. 26 East West
1060 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: Ness

Lease Name: Whipple Well #: 4-14

Field Name: _____

Producing Formation: Mississippian

Elevation: Ground: 2624 Kelly Bushing: 2631

Total Depth: 4602 Plug Back Total Depth: 4602

Amount of Surface Pipe Set and Cemented at: 253 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.

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 #: _____

4/24/2012 5/05/2012 5/25/2012

Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 21200 ppm Fluid volume: 960 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: 05/31/2012

Confidential Release Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

ALT I II III Approved by: NAOMI JAMES Date: 05/31/2012