



KANSAS CORPORATION COMMISSION 1085031
OIL & GAS CONSERVATION DIVISION

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

CONFIDENTIAL

WELL COMPLETION FORM

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: CLAYTON CAMOZZI
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 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 #: _____

<u>2/27/2012</u>	<u>3/4/2012</u>	<u>3/5/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-165-21963-00-00

Spot Description: _____

NW SW SE SW Sec. 7 Twp. 16 S. R. 16 East West

565 Feet from North / South Line of Section

1370 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Rush

Lease Name: STRAMEL Well #: 2-7

Field Name: _____

Producing Formation: N/A

Elevation: Ground: 1950 Kelly Bushing: 1958

Total Depth: 3650 Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: 1092 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: 88000 ppm Fluid volume: 400 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: 06/19/2012
- Confidential Release Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT I II III Approved by: NAOMI JAMES Date: 06/19/2012