



KANSAS CORPORATION COMMISSION 1084478

Form ACO-1

June 2009

Form Must Be Typed

Form must be Signed

All blanks must be Filled

CONFIDENTIAL

OIL & GAS CONSERVATION DIVISION

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 # 5822

Name: Val Energy, Inc.

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>2/23/2012</u>	<u>2/29/2012</u>	<u>3/1/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-167-23775-00-00

Spot Description: _____

NW SW SE NW Sec. 32 Twp. 15 S. R. 15 East West

2140 Feet from North / South Line of Section

1500 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Russell

Lease Name: WAYNE FUNK Well #: 2-32

Field Name: _____

Producing Formation: N/A

Elevation: Ground: 1890 Kelly Bushing: 1900

Total Depth: 3567 Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: 481 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: 58000 ppm Fluid volume: 800 bbls

Dewatering method used: Hauled to Disposal

Location of fluid disposal if hauled offsite:

Operator Name: CRAIG, WARD DBA CRAIG OIL COMPANY

Lease Name: RUBIN NUSS License #: 31341

Quarter SW Sec. 5 Twp. 16 S. R. 14 East West

County: BARTON Permit #: D09153

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: 06/14/2012
- Confidential Release Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT I II III Approved by: NAOMI JAMES Date: 06/18/2012