



KANSAS CORPORATION COMMISSION 1086390
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 # 34574
Name: Shell Gulf of Mexico Inc.
Address 1: 150 N DAIRY-ASHFORD (77079)
Address 2: PO BOX 576 (77001-0576)
City: HOUSTON State: TX Zip: 77001 + 0576
Contact Person: Damonica Pierson
Phone: (832) 337-2172
CONTRACTOR: License # 34718
Name: Nabors Drilling USA, LP
Wellsite Geologist: Jack Grow
Purchaser: CONDUCTOR ONLY

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil WSW SWD SIOW
 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 #: _____

06/11/2012	06/12/2012	06/12/2012
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-077-21842-00-00

Spot Description: _____
E2 NW, NE, NE Sec. 27 Twp. 34 S. R. 7 East West
330 Feet from North / South Line of Section
940 Feet from East / West Line of Section

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

County: Harper
Lease Name: Croft Farms 3407 Well #: 27-1

Field Name: Wildcat
Producing Formation: N/A

Elevation: Ground: 1384 Kelly Bushing: 1408
Total Depth: 60 Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: 0 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: 0 ppm Fluid volume: 0 bbls
Dewatering method used: Hauled to Disposal

Location of fluid disposal if hauled offsite:
Operator Name: Plumb Thicket Landfill

Lease Name: N/A License #: 99999
Quarter SW Sec. 4 Twp. 31 S. R. 6 East West

County: Harper Permit #: KDHE Permit No. 0842

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: 07/06/2012
 Confidential Release Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
ALT I II III Approved by: NAOMI JAMES Date: 07/06/2012