



KANSAS CORPORATION COMMISSION 1086389
OIL & GAS CONSERVATION DIVISION

Form ACO-1
June 2009

CONFIDENTIAL

WELL COMPLETION FORM

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

WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 4767
Name: Ritchie Exploration, Inc.
Address 1: 8100 E 22ND ST N # 700
Address 2: BOX 783188
City: WICHITA State: KS Zip: 67278 + 3188
Contact Person: John Niernberger
Phone: (316) 691-9500
CONTRACTOR: License # 33575
Name: WW Drilling, LLC
Wellsite Geologist: Bob Peterson
Purchaser: NCRA

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 #: _____

<u>03/21/2012</u>	<u>04/01/2012</u>	<u>04/01/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-179-21299-00-00

Spot Description: 130'S & 130'E of SENENE

SE SE NE NE Sec. 8 Twp. 9 S. R. 30 East West

1120 Feet from North / South Line of Section

200 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Sheridan

Lease Name: CKG-Schiltz Well #: 1

Field Name: _____

Producing Formation: LKC

Elevation: Ground: 2946 Kelly Bushing: 2951

Total Depth: 4655 Plug Back Total Depth: 4601

Amount of Surface Pipe Set and Cemented at: 303 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: 2531 Feet

If Alternate II completion, cement circulated from: 0

feet depth to: 2531 w/ 330 sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 18000 ppm Fluid volume: 800 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: 07/03/2012
- Confidential Release Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT I II III Approved by: NAOMI JAMES Date: 07/03/2012