



# CONFIDENTIAL

## WELL COMPLETION FORM

### WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 33476  
 Name: FIML Natural Resources, LLC  
 Address 1: 410 17TH ST STE 900  
 Address 2: \_\_\_\_\_  
 City: DENVER State: CO Zip: 80202 + 4420  
 Contact Person: Cassie Parks  
 Phone: ( 303 ) 893-5073  
 CONTRACTOR: License # 6454  
 Name: Cheyenne Well Service, Inc.  
 Wellsite Geologist: NA  
 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: FIML Natural Resources, LLC  
 Well Name: Pfeifer-Ball 3-9-1931  
 Original Comp. Date: 10/23/2006 Original Total Depth: 4807

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 #: \_\_\_\_\_

05/25/2012    06/05/2012  
 Spud Date or    Date Reached TD    Completion Date or  
 Recompletion Date    Recompletion Date

API No. 15 - 15-171-20633-00-00  
 Spot Description: C NENW  
 \_\_\_\_\_ NE NW Sec. 9 Twp. 19 S. R. 31  East  West  
660 Feet from  North /  South Line of Section  
1980 Feet from  East /  West Line of Section

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

County: Scott  
 Lease Name: PFEIFER BALL Well #: 3-9-1931  
 Field Name: \_\_\_\_\_  
 Producing Formation: Mississippi  
 Elevation: Ground: 2979 Kelly Bushing: 2990  
 Total Depth: 4807 Plug Back Total Depth: 4764  
 Amount of Surface Pipe Set and Cemented at: 391 Feet  
 Multiple Stage Cementing Collar Used?  Yes  No  
 If yes, show depth set: 2996 Feet  
 If Alternate II completion, cement circulated from: 2996  
 feet depth to: 0 w/ 535 sx cmt.

#### Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: \_\_\_\_\_ ppm Fluid volume: \_\_\_\_\_ bbls  
 Dewatering method used: \_\_\_\_\_  
 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: 07/17/2012
- Confidential Release Date: \_\_\_\_\_
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT  I  II  III Approved by: NAOMI JAMES Date: 07/18/2012