



CONFIDENTIAL **WELL COMPLETION FORM**
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 5046
 Name: Raymond Oil Company, Inc.
 Address 1: PO BOX 48788
 Address 2: _____
 City: WICHITA State: KS Zip: 67202 + 1822
 Contact Person: Ted McHenry
 Phone: (316) 267-4214
 CONTRACTOR: License # 5822
 Name: Val Energy, Inc.
 Wellsite Geologist: Max Lovely
 Purchaser: _____

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>4/27/2012</u>	<u>5/10/2012</u>	<u>5/10/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-191-22645-00-00
 Spot Description: _____
 SW SW NW NW Sec. 25 Twp. 30 S. R. 1 East West
1029 Feet from North / South Line of Section
246 Feet from East / West Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
 County: Sumner
 Lease Name: Ternes Well #: 1
 Field Name: _____
 Producing Formation: na
 Elevation: Ground: 1274 Kelly Bushing: 1285
 Total Depth: 4060 Plug Back Total Depth: _____
 Amount of Surface Pipe Set and Cemented at: 343 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: 3200 ppm Fluid volume: 400 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: 08/01/2012

Confidential Release Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

ALT I II III Approved by: Deanna Garrison Date: 08/08/2012