

**CONFIDENTIAL****WELL COMPLETION FORM****WELL HISTORY - DESCRIPTION OF WELL & LEASE**OPERATOR: License # 34192Name: SandRidge Exploration and Production LLCAddress 1: 123 ROBERT S. KERR AVE

Address 2: _____

City: OKLAHOMA CITY State: OK Zip: 73102 + 6406Contact Person: Karen SharpPhone: (405) 429-5745CONTRACTOR: License # 34445Name: Keen Energy Services LLCWellsite Geologist: Kathy Gentry

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>09/03/2010</u>	<u>09/18/2010</u>	<u>09/18/2010</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-007-23587-01-00

Spot Description: _____

S2 - S2 - SW - SW Sec. 1 Twp. 35 S. R. 11 East West165 Feet from North / South Line of Section660 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

 NE NW SE SWCounty: BarberLease Name: SCHROCK 1 Well #: 1HField Name: Kiowa EastProducing Formation: MISSISSIPPI LIMEElevation: Ground: 1353 Kelly Bushing: 1374Total Depth: 9342 Plug Back Total Depth: _____Amount of Surface Pipe Set and Cemented at: 1010 FeetMultiple 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: _____ 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 ReceivedDate: 01/10/2011 Confidential Release Date: _____ Wireline Log Received Geologist Report Received UIC DistributionALT I II III Approved by: Deanna Gamisor Date: 08/08/2012