



CONFIDENTIAL

OIL & GAS CONSERVATION DIVISION

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

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 34662 Name: Tug Hill Operating, LLC Address 1: 550 BAILEY AVE, STE 510 Address 2: City: FT. WORTH State: TX Zip: 76107 Contact Person: Winnie Scott Phone: (817) 632-3400 CONTRACTOR: License # 34670 Name: Patterson-UTI Drilling Company LLC Wellsite Geologist: NA Purchaser:

Designate Type of Completion: [X] New Well [] Re-Entry [] Workover [] Oil [] WSW [X] 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 #:

05/19/2012 07/06/2012 07/06/2012 Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

API No. 15 - 15-033-21628-00-00

Spot Description: SW SE SE SE Sec. 7 Twp. 33 S. R. 17 [] East [X] West 211 Feet from [] North [X] South Line of Section 653 Feet from [X] East [] West Line of Section

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

County: Comanche

Lease Name: Bearden Trust Well #: 1 SWD

Field Name:

Producing Formation: Arbuckle

Elevation: Ground: 1881 Kelly Bushing: 23

Total Depth: 6976 Plug Back Total Depth:

Amount of Surface Pipe Set and Cemented at: 818 Feet

Multiple Stage Cementing Collar Used? [] Yes [X] 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: 18000 ppm Fluid volume: 1300 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

- [X] Letter of Confidentiality Received Date: 08/28/2012 [] Confidential Release Date: [X] Wireline Log Received [] Geologist Report Received [X] UIC Distribution ALT [X] I [] II [] III Approved by: NAOMI JAMES Date: 08/28/2012